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**Labour, Modernity and the Canadian State:
A History of Aboriginal Women and Work in the Mid-Twentieth Century**

Mary Jane Logan McCallum

A Thesis submitted to the Faculty of Graduate Studies of
The University of Manitoba
in partial fulfilment of the requirements of the degree of
Doctor of Philosophy

Department of History
University of Manitoba
Winnipeg

Submitted to Graduate Studies
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**Labour, Modernity and the Canadian State: A History of Aboriginal Women and Work in
the Mid-Twentieth Century**

BY

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**A Thesis/Practicum submitted to the Faculty of Graduate Studies of The University of
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Abstract

This thesis explores how labour, modernity and the state shaped the history of Aboriginal women in mid-twentieth century Canada. It does so through four case studies drawn from the 1940s to the 1970s. The first examines Native women and domestic service. The second case study analyzes the federal Indian Placement and Relocation Program and the experience of women in it, focusing on those trained as hairdressers. The third case study explores the gendered history of the early Community Health Representatives program. The final case study utilizes the history of the Registered Nurses of Canadian Indian Ancestry association as a window into the history of Aboriginal nurses in the twentieth century. This dissertation draws on a variety of archival sources including the federal records of the Department of Indian Affairs and National Health and Welfare, oral interviews, the records of Aboriginal organizations, print and other media. This study illustrates the critical investment the Canadian state had in regulating Aboriginal women's labour. By exploring the history of Aboriginal women and wage work in the twentieth century, this thesis resists common narratives of Aboriginal displacement and invisibility especially in the fields of Indian health, education and employment. It adds to a growing literature investigating Aboriginal people in the modern era and challenging narratives of Aboriginal absence, displacement and apparent insignificance, inauthenticity and loss which current narratives about Aboriginal modernity entail.

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Chapter One

Introduction

The January 18, 1958, edition of the “Real Manitobans” section of the *Winnipeg Free Press* was dedicated to Aboriginal women workers. There was plenty to catch your eye in the full-page spread. The article opened with Henry Wadsworth Longfellow’s

Hiawatha:

Ye who love a nation’s legends
Love the ballads of a people,
That like voices from afar off
Call to us to pause and listen –
Listen to this Indian legend
To this song of Hiawatha.

To the left, a drawing of a confident “Real Manitoban,” hands on skirted hips, dwarfed the Golden Boy on top of the legislative building in downtown Winnipeg and the prairie and woods beyond. Around the text, there are four black-and-white photos of smartly-dressed women learning stenography at the Manitoba Technical Institute, smiling from an office at the Tuberculosis Registry of the Manitoba Sanatorium Board, studying night school course notes on comptometry and setting a wave for a customer in a beauty salon. “Indian Girls Pave the Way for Others,” the article announced.

“It’s a song more than tinged with sadness – but a song not without hope – sung by Canada’s native sons and daughters as they try to find their way in the strange and awesome reaches of the city. Each day brings more Indian girls from reservations and

other rural points to establish themselves in Winnipeg and quite a number succeed – paving the way for others as they go.” Indian girls were, according to the author,

displaced persons in their own land ... endeavouring to bridge the gap between generations ago when their proud race was left far behind, and present day conditions of our so called civilization. Just as our pioneer forbears fished and hunted and farmed, so runs the saga of their people up to the present day. They come to the city to catch up with education in modern institutions of learning ... and to find employment that they may share in the fruits of Canada's growing prosperity.¹

These post-war depictions were in many ways typical of the contemporary popular obsession with “the Indian today.”² At once racialized and inauthentic, ancient and displaced, backwards and forwards, marginalized and urban, such ambivalent images are typical when it comes to Native people even in current historical scholarship. Ideas about modernity and the state frame Native people's labour and bring these images into focus. As workers, Native women “share” in the nation's prosperity alongside its other citizens. Working at typewriters, permanent waves and business ledgers, the women portrayed modern skills and education in well-known locales in Winnipeg. By looking at the history of Native domestics, hairdressers, Community Health Representatives and nurses, I hope to illuminate how Aboriginal women's wage labour was shaped by the politics of modernity and the state. In so doing, I hope to also challenge common narratives of Aboriginal displacement in the twentieth century.

This chapter will set the historiographical contexts for the thesis. It will assess the key literatures to which this thesis speaks, namely, labour, modernity and the state, and it will argue for the importance of these interconnected themes to twentieth-century

¹ Mary Bletcher, “Indian Girls Pave the Way for Others,” *Real Manitobans*, *Winnipeg Free Press* January 18, 1958, 7.

² Chadwick Allen, “Unspeakable Settler: ‘The Indian Today’ in International Perspective,” *American Studies* 46:3/4 (Fall–Winter 2005): 39–57.

Aboriginal women's history. This chapter will then explain the structure of the thesis and outline the sources used in its research.

Labour

I came to the topic of Aboriginal women's work history in a few ways. One was through my Masters thesis, which looked at the history of Girl Guides in Indian Residential schools in Canada.³ I found that Girl Guides continued the curricular objectives of the schools and the vision of the federal government to reform Indian girls by teaching them 'proper' gender roles and preparing them for Canadian citizenship and integration. Ironically, at the same time, Girl Guides also espoused an image of the 'authentic' Indian and used the image to teach non-Native girls the same lessons. While doing my research, I wondered about what happened to some of the students who were once Girl Guides. While there is much written about primary and secondary Indian education, there is relatively little about what happened to pupils once they graduated from or left federal Indian schools.⁴ This is not true of the contemporary records, which, I found, were quite preoccupied with the topic of employment and depicted it as a going national concern. What makes education a topic of Indian history but not labour?

Studies about Native people and wage work have indeed tended not to have been associated in any way with studies in education (although some studies of unemployment have). Nor have they been driven by a focus on trade unions, the labour movement,

³ Mary Jane McCallum, "To Make Good Canadians: Girl Guiding in Indian Residential Schools" (MA thesis, Trent University, 2002).

⁴ A new book by Blair Stonechild brings to date almost forty years of scholarly work on Native education, much of which was created by Native people. Blair Stonechild, *The New Buffalo: The Struggle for Aboriginal Post-Secondary Education in Canada* (Winnipeg: University of Manitoba Press, 2006).

working class culture, and ‘everyday-ness’ the way other Canadian labour history has. Instead, fur trade economics and a desire to locate and describe a response to capitalism in the collapse of the fur trade have been the context for the bulk of Aboriginal labour history. These works attempt to explain the long-term effects of trade on Aboriginal people, economies, cultures and communities. The literature has generally centred on a debate over whether Native cultures and communities “declined” or “persisted” after the fur trade period.⁵ In many ways, decline, and the matter of its scheduling, is *the* question in Aboriginal history, and the only question asked about Aboriginal people by most historians in the Canadian field.

In its labour history form, the question appeared first in the materialist sense: how did the transition to modern imperial economic systems account for the cataclysmic decline, dependence and ultimate irrelevance of Indian people to the Canadian economy? Later, it appeared in culturalist form: how did Indians, as active agents of ethnohistory, selectively participate in capitalist economies for reasons and in ways that supported their

⁵ Other variants of the decline/persist debate include continuity, equality, co-operation, the middle-ground, self-sufficiency/autonomy, accommodation and partnership as well as coercion, dependence and dominance. See Arthur J. Ray, *Indians in the Fur Trade, 1660–1870* (Toronto: University of Toronto Press, 1974), Robin Fisher, *Contact and Conflict: Indian-European Relations in British Columbia, 1774–1890* (Vancouver: University of British Columbia Press, 1978), Rolf Knight, *Indians At Work: An Informal History of Native Indian Labour in British Columbia, 1853–1930* (Vancouver: University of British Columbia Press, 1978), Gerald Friesen, *The Canadian Prairies: A History* (Toronto: University of Toronto Press, 1987), J.R. Miller, *Skyscrapers Hide the Heavens: A History of Indian-White Relations in Canada* (Toronto: University of Toronto Press, 1989), Richard White, *The Middle Ground: Indians, Empires, and Republics in the Great Lakes Region, 1650–1815* (Cambridge: Cambridge University Press, 1991) and Colin Calloway, *New Worlds for All: Indians, Europeans and the Remaking of Early America* (Baltimore: The Johns Hopkins University Press, 1997). For a gendered formulation of the decline/persist debate, see Theda Perdue, *Cherokee Women: Gender and Culture Change, 1700-1835* (Lincoln: University of Nebraska Press, 1998).

cultural communities as well as their local and regional economies?⁶ To be sure, other frames have been used for analyzing Native labour history in ways that do not isolate Native people from broader historical questions including health, voyageur culture, masculinity, exhibitions and performance, longshoring and the waterfront, and citizenship and enfranchisement.⁷ But like the earlier work, there seems to be a particular geography to most studies of Indian labour. A disproportionate amount of the work focuses on the west, British Columbia and resource-based labour.

Another striking feature of the secondary literature about Aboriginal people and work is that the vast majority of it is about and by men, further obscuring Native women's work. The tendency to exclude an analysis of gender in Aboriginal history is an important oversight not only because the term and the idea of 'Indian' too often represent only Indian men, but also because when gender is not made visible, we risk reproducing a history in which women are absent. For example, in his paper on how the image of the

⁶ Steven High, "Native Wage Labour and Independent Production during the 'era of irrelevance,'" *Labour /Le Travail* 37 (Spring 1996), 243–64.

⁷ Maureen Lux, *Disease, Medicine, and Canadian Plains Native People, 1880–1940* (Toronto: University of Toronto Press, 2001), Elizabeth Vibert, *Traders' Tales: Narratives of Cultural Encounters in the Columbia Plateau 1807–1946* (Norman: University of Oklahoma Press, 1997), Carolyn Podruchny, "Unfair Masters and Rascally Servants? Labour Relations Among Bourgeois, Clerks, and Voyageurs in the Montreal Fur Trade, 1870–1821," in eds. Bryan D. Palmer and Joan Sangster *Labouring Canada: Class, Gender, and Race in Canadian Working-Class History* (Don Mills: Oxford University Press, 2008), 4–16, Paige Raibmon, *Authentic Indians: Episodes of Encounter from the Late Nineteenth-Century Northwest Coast* (Durham: Duke University Press, 2005), Clyde Ellis, "Five Dollars a Week to Be 'Regular Indians': Shows, Exhibitions, and the Economics of Indian Dancing, 1880–1930," in eds. Brian Hosmer and Colleen O'Neill, *Native Pathways: American Indian Culture and Economic Development in the Twentieth Century* (Boulder: University Press of Colorado, 2004), 184–208, Andy Parnaby, "'The best men that ever worked the lumber': Aboriginal Longshoremen on Burrard Inlet, BC, 1863–1939," *The Canadian Historical Review* 87:1 (March 2006), 53–78, and Robin Brownlie, "'A better citizen than lots of white men': First Nations Enfranchisement – an Ontario Case Study, 1918–1940," *The Canadian Historical Review* 87:1 (March 2006), 29–52.

“lazy Indian” has negatively impacted the field of Aboriginal labour history,⁸ John Lutz reveals the tendency in this field to represent Indian people or ideas about them as simply without gender when in fact, the assumption is that, unless otherwise stated, the subject in question is Indian men. I would argue that the image of the “lazy Indian” is in fact very much about notions of manliness and modernity and is a construct that does not make sense without a gendered pair: the image of the “beast of burden,”⁹ or breadwinning woman.

The literature on working Native women is set wholly outside of the context of waged work, however. According to Andrea Smith, “many scholars argue that men were disproportionately affected by colonization because the economic systems imposed on Native nations deprived men of their economic roles in the communities more so than women.”¹⁰ Most critiques of such an approach, including Smith’s, argue that by paying attention to the economic realm only, we ignore the effects of colonization on Aboriginal women. But we also very simply separate Native women from the economic realm altogether as if they in fact played no important or public economic roles,

A scarcity of histories of Aboriginal women’s work particularly in the post-fur trade era has resulted in part from the erroneous middle-class assumption that Aboriginal men were the main or sole family breadwinners whose work counted for more than that of women. As scholars such as Karen Flynn have shown, this ideology was rarely

⁸ John Lutz, “Lazy Indians or Lazy Scholars? Problems in Ethnohistory,” presented at the 86th Annual Meeting of the Canadian Historical Association, Saskatoon Saskatchewan, Tuesday 29 May 2007.

⁹ See for example, Patricia Albers and Beatrice Medicine, eds., *The Hidden Half: Studies of Plains Indian Women* (New York: University Press of America, 1983).

¹⁰ Andrea Smith, “Native American Feminism, Sovereignty and Social Change,” in *Making Space for Indigenous Feminism*, ed. Joyce Green (Halifax: Fernwood Publishing, 2007), 98.

applicable to non-white people, for whom the labour of women was essential to survival.¹¹ Some recent work on Native women and labour also complicates this picture. For example, Carol Williams' analysis of seasonal labour and doorstep economies in late-nineteenth-century British Columbia and Tressa Berman's more contemporary study of the production and redistribution of goods through kinship, wage work and informal economies in North Dakota have examined Native women's economic contributions to family survival as the central object of historical inquiry.¹² Two scholars who study women and production, Kathy M'Closkey and Sherry Farrell Racette, have insisted on shifting the focus in this field from the products women make to the women workers themselves. They find that one of the reasons we do not think about women's wage labour is because we think about women's production as object (rug, coat, basket, artifact) and as the subject of something else (tradition, beauty, art or craft, authenticity) rather than as evidence of women's labour.¹³

¹¹ Karen Flynn, "Race, Class and Gender: Black Nurses in Ontario, 1950–1980," (PhD Diss., York University, 2000), 63. See also Jennifer Blythe and Peggy Martin McGuire, "The Changing Employment of Cree Women in Moosonee and Moose Factory," in eds. Christine Miller and Patricia Chuchryk, *Women of the First Nations: Power, Wisdom, and Strength* (Winnipeg: University of Manitoba Press, 1996), 131–150.

¹² Carol Williams, "Between Doorstep Barter Economy and Industrial Wages: Mobility and Adaptability of Coast Salish Female Labourers in Coastal British Columbia 1858–1980," in eds. Mark B. Spencer and Lucretia Scoufos *Native Being, Being Native: Identity and Difference, Proceedings of the 5th North American Symposium* (Durant: Southeastern Oklahoma State University, 2005) and Tressa Berman, *Circle of Goods: Women, Work and Welfare in a Reservation Community* (Albany: State University of New York, 2003).

¹³ Kathy M'Closkey, *Swept Under the Rug: A Hidden History of Navajo Weaving* (Albuquerque: University of New Mexico Press, 2002); Colleen O'Neill, *Working the Navajo Way: Labour and Culture in the Twentieth Century* (Lawrence: University Press of Kansas, 2005); and Sherry Farrell Racette, "Don't Get Me Started! Absence, Tokenism, and Missed Opportunities? Aboriginal Women and Public History in Canada," presented at the 86th Annual Meeting of the Canadian Historical Association, Saskatoon Saskatchewan, Wednesday 30 May 2007.

It is very rare for studies of Native women and work to look past the Second World War, and apart from Colleen O'Neill, whose work on Navajo household economies and diverse and responsive economic strategies spanning 1930 and 1970, few studies bridge the war on either side. Non-Native women's work patterns have received far more consistent attention to change over time in these years. The war itself has framed a particular field of women's work history which highlights patterns of movement towards full-time waged employment in munitions plants and elsewhere and then a retreat out of the workforce after the war, an analysis that has been recently re-examined.¹⁴ However, "Rosie the Riveter" was not typical of women workers during the war and most non-white women, Patty Leow argues in the US context, took clerical, domestic or telephone jobs, their realities "a far cry" from popular images of women's war work.¹⁵

Also perhaps somewhat misrepresented is the retreat to domesticity and away from labour after the war. The post-war years have also been a period of interest for women's historians, with a recent focus on post-structuralist analysis of the discourses used and formulated about gender, sexuality, family and 'normalcy.'¹⁶ To be sure, the

¹⁴ Ruth Roach Pierson, *"They're Still Women After All": The Second World War and Canadian Womanhood* (Toronto: McClelland and Stewart, 1986); Wendy Mitchinson, Paula Bourne, Alison Prentice, Gail Cuthbert Brant, Beth Light and Naomi Black, eds., *Canadian Women: A Reader* (Toronto: Harcourt Brace, 1996); Jennifer A. Stephen, *Pick One Intelligent Girl: Employability, Domesticity, and the Gendering of Canada's Welfare State, 1939–1947* (Toronto: University of Toronto Press, 2007).

¹⁵ Patty Leow, "The Back of the Homefront: Black and American Indian Women in Wisconsin during World War II," *Wisconsin Magazine of History* 82:2 (Winter 1998–1999), 82–103.

¹⁶ Mary Louise Adams, *The Trouble with Normal: Postwar Youth and the Making of Heterosexuality* (Toronto: University of Toronto Press, 1997), Mona Gleason, *Normalizing the Ideal: Psychology, Schooling and the Family in Post-War Canada*

Departments of Indian Affairs and National Health and Welfare each endeavoured to 'normalize' the Aboriginal public in the post-war period along the lines of practical health education, integrated labour programs and vocational post-secondary programs. But while these trends did impact the lives of many Aboriginal women in these years, the so-called retreat of Canadian women to the domestic sphere after the war may not translate.

Much of the scholarship on Canadian women and work has been useful in illuminating how gender inequality gets written onto the work that women do, however Aboriginal women's work history also departs from standard narratives of women's history in the twentieth century. For example, Native women workers like all women workers, were subject to common understandings about space which determined that the city – and thus also working in cities – was 'bad' for women. Also, Native women worked in occupational fields such as domestic service which were racialized and gendered in a variety of ways. However for many Native women, labour was also part of a colonial apparatus meant to extinguish Aboriginal title and status. For Aboriginal women, employment has been popularly paired with notions of cultural decline and integration. It has also been associated by Aboriginal women workers themselves as the social and cultural responsibilities of building Indigenous communities and an important means of resisting the Canadian state.

We must be doubly aware when dealing with Aboriginal women's history that we are conditioned to think about Aboriginal women as private-sphere figures circumscribed not only by the home, but also by the reserve or community in which they lived. This

(Toronto: University of Toronto Press, 1999), and Elaine Tyler May, *Homeward Bound: American Families in the Cold War Era* (New York: Basic Books, 1988).

thesis is in many ways a history of public women, or women in the public. In the public, Native women suffered the worst moral and social regulation of the era, subjected by both their gender and race to separate schooling, provincial policing and laws meant to contain and discipline women as well as the “added layer of surveillance” of the Indian Department and the *Indian Act* which was present in their lives from birth to death and supplemented on an everyday basis by the intense denigrations of Canadian racism.¹⁷

For many scholars who have studied non-white women including Native women, a key question in the research has been whether it was gender discrimination or racial discrimination that most affected them.¹⁸ What is more important, gender or indigeneity, patriarchy or colonialism? In this thesis on women and work, racial and gender oppression is understood as interconnected because gender or womanliness is not exclusively white, nor indigeneity exclusively masculine. The growing field of histories of one of the most traditionally white and feminized professions, nursing, has been very useful to this research. Work on migrant nurses of colour articulates many of the forms of combined sexual and racial discrimination experienced also by Native women.¹⁹

¹⁷ Joan Sangster, *Regulating Girls and Women: Sexuality, Family and the Law in Ontario, 1920–1960* (Toronto: Oxford University Press, 2001): 170.

¹⁸ Carolyn Kenny, *North American Indian, Métis and Inuit Women Speak about Culture, Education and Work* (Ottawa: Status of Women Canada, 2002), available at Status of Women Canada, http://www.swc-cfc.gc.ca/pubs/pubspr/0662318978/200203_0662318978_1_e.html (accessed 13 July, 2008) and Julie Guard, “Authenticity on the Line: Women Workers, Native “Scabs,” and the Multi-ethnic Politics of Identity in a Left-Led Strike in Cold War Canada,” *Journal of Women's History* 15:4 (Winter 2004), 117–140.

¹⁹ Dea Birkett, “The ‘White Woman’s Burden’ in the ‘White Man’s Grave’: The Introduction of British Nurses in Colonial West Africa,” in *Western Women and Imperialism: Complicity and Resistance* eds., Nupur Chaudhuri and Margaret Strobel (Bloomington: Indiana University Press, 1992), 177–188, Kathryn McPherson, *Bedside Matters: The Transformation of Canadian Nursing 1900–1990* (Toronto: Oxford University Press, 1996) and “Nursing and Colonization: The Work of Indian Health

Modernity

While “labour,” as an analytic tool used in this thesis, arises out of the study of economic history and merges in many ways with social and gender history, “modernity” as a tool of analysis comes from the cultural studies field. This interdisciplinary field is noted for post-modern and post-colonial critiques of imperial history and the use of literary criticism, psychology and discourse analysis. The study of modernity is the study of the social and cultural impact of the late-nineteenth to twentieth-century change over time marked by an enthusiasm for material and technological progress, the expansion and organization of industrialism and capitalism and the development of and faith in scientific laws and theories meant to explain the universe and human life in their entirety. Such broad developments have led to certain assumptions about Indigenous people and their work. In this thesis, I will be borrowing largely from the work on modernity by Philip Deloria, Paige Raibmon and Colleen O’Neill. Each of these authors asks some version of the following question, “What if we take as a premise that modernity is not something that Indians by nature or by tradition are prohibited from partaking in and indeed creating?”

Philip Deloria explains how Indians were produced as “unexpected” in a modern setting, their authenticity drawn from their location outside of modernity in an unspecific

Services Nurses in Manitoba, 1945–1970,” in eds. Georgina Feldbery, Molly Ladd-Taylor, Alison Li and Kathryn McPherson, *Women, Health and Nation: Canada and the United States since 1945* (Montreal: McGill-Queen’s University Press, 2003), 223–246, Helen Gilbert, “Great Adventures in Nursing: Colonial Discourse and Health Care Delivery in Canada’s North,” *Jouvert: A Journal of Postcolonial Studies* 7:2 (Winter/Spring, 2003), available at: <http://social.chass.ncsu.edu/jouvert/v7i2/gilber.htm> (accessed 13 July, 2008), and Karen Flynn, “Race, Class and Gender” and “Race, the State, and Caribbean Immigrant Nurses, 1950-1962,” in eds. Felberg, Ladd-Taylor, Li, and McPherson, *Women, Health and Nation*, 247–263.

primitive past. Located outside of modernity, Indians (as they were imagined by non-Indians) became a means to critique modern, urban, industrial America. The assumption that modern America existed so far away in time and space from the cultural context of “Indianness,” meant that set within this context, Indians were “unexpected.” Deloria uses moments of unexpectedness to draw out a history of expectations that reveal the very profound problems with popular understandings of Indianness. In many ways, Native women workers styling hair in beauty parlours or moving through the ranks of the nursing profession exist as “unexpected labour” – revealing *not* their incapacity to be hairdressers or nurses, but the broader assumptions about Indianness that make Indian hairdressers and nurses seem so anomalous.²⁰ Deloria calls stories of unexpectedness “secret histories,” suggesting the various ways that they have survived and are talked about in a modern context.

Paige Raibmon, in her book *Authentic Indians: Episodes of Encounter from the Late-Nineteenth-Century Northwest Coast*, teases out the definitions of Indian authenticity in relation to imperialism in one particular region. She argues that certain binaries separated Indianness from B.C.-ness: Indian versus White, traditional versus modern, primitive versus civilized. She also argues that authentic Indianness conformed with colonial legitimacy and ideas of white racial superiority, thus adding a clear dynamic of power to the study of modern Indianness.

In her work, Colleen O’Neil focuses on this binary of tradition and modernity in the post-war period. She argues that this dichotomy is a product of modernization theory, which is a “linear way of thinking about economic change that has shaped ideas about

²⁰ Philip J. Deloria, *Indians in Unexpected Places* (Lawrence: University Press of Kansas, 2004) and *Playing Indian* (New Haven: Yale University Press, 1998).

development as well as our understanding of dependency.” At the core of modernization theory are older ideas about social evolution, “white man’s burden,” and progress that worked under the assumptions that the West provided the best model of living and that modernity for Indigenous people, unlike others, signified cultural deterioration and entailed conformity. Using post-colonial literature, O’Neill argues that “tradition” gains meaning in relation to the modern, and that the two have been painted in a false polar dichotomy. While “traditional” has been a useful political strategy of resistance in Canada, we must be aware of how it can also be used to discipline, manage and reduce Aboriginal people’s broader experiences of the world.²¹

In terms of Indigenous scholarly labour, Anthropologist Audra Simpson calls this the ‘Ethnographic Trap’: that Native people can only ever be, talk to and engage with things certified authentically Indigenous. Simpson and Andrea Smith argue that scholarship about Aboriginal people has focused on how “cool, spiritual and interesting we are” as objects of inquiry rather than producers of scholarship. Pushing this further, they have noted that within the fields of American Indian Studies, Native Studies and Indigenous Studies, there is a tendency to limit the fields of analysis open to Indigenous scholars: “we can only talk to each other, and no one else on planet earth,” argues Smith.²² Likewise, “modernity” is too often used as simple shorthand for decline, loss and colonialism – the subject of someone else’s active past. When efforts are made to

²¹ Colleen O’Neill, “Rethinking Modernity and the Discourse of Development in American Indian History, an Introduction,” in eds. Brian Hosmer and Colleen O’Neill, *Native Pathways: American Indian Culture and Economic Development in the Twentieth Century*, (Boulder: University Press of Colorado, 2004), 1–24 and *Working the Navajo Way: Labour and Culture in the Twentieth Century* (Lawrence: University Press of Kansas, 2005).

²² Andrea Smith, “Indigenous Women and Violence: Rethinking the Nation-State” (lecture, University of Manitoba, Winnipeg, MB, 10 March 2008).

include Aboriginal people in the twentieth century the method frequently used is to turn collective “victims” into individual contributors to Canadian culture and identity²³ rather than to engage in theoretical analysis of change over Indian time.

Historians are profoundly uncomfortable with Aboriginal modernity, as evidenced by the chronologies and scholarship available to the history student. Aboriginal history is heavily weighted on contact and the fur trade eras. The language used by historians to discuss Indianness after the fur trade is indicative of this discomfort with change over time, as well as the whiteness and indeed arrogance of the labour history field:

“irrelevant,” “dependent,” and “oblivion.”²⁴ While the late-nineteenth to early-twentieth centuries have been of more interest to historians as of late, the newest work still stops at around 1940, leaving the study of the 1950s and the 1960s largely to social science research. It is not entirely coincidental that Indian history itself is said to have arisen out of “relative obscurity” in the 1960s, around the same time that Indians also are said to have emerged from a so-called era of irrelevance.²⁵ The Native people in those histories are suspiciously similar, though, to the ones in the contact and fur trade years; that is, culturally incapable of withstanding change over time. With a brief reference to Indian political organization or Indian activism, modern treaties and land claims at the end of the average Aboriginal history course, the Indian timeline is basically complete.

²³ David R. Newhouse, Cora J. Voyageur, and Dan Beavon, eds., *Hidden in Plain Sight: Contributions of Aboriginal Peoples to Canadian Identity and Culture* (Toronto: University of Toronto Press, 2005).

²⁴ See for example, Bryan Palmer, *Working Class Experience: The Rise and Reconstitution of Canadian Labour* (Toronto: Butterworths, 1983).

²⁵ Keith Thor Carlson, Melinda Marie Jette and Kenichi Matsui, “An Annotated Bibliography of Major Writings in Aboriginal History, 1990–99,” *Canadian Historical Review* 82:1 (2001), 123 and Ken Coates, “Writing First Nations into Canadian History: A Review of Recent Scholarly Works,” *Canadian Historical Review* 81:1 (2000), 99–114.

The gap in our history which exists after the so-called closing of the frontier, the disappearance of the buffalo, the signing of the numbered treaties, the plotting of reserves and the consolidation of the *Indian Act* makes it appear as if Native people retreated from ‘planet earth’ only to appear again, angry and tardy, in 1969. The gap in our history is more often called ‘absence,’ and it is always easier for historians to find proof of absence than of presence when it comes to Native people and especially when it comes to Native women. We must be careful not to use absence as a method and a foundation of our work, however. For example, in her book on the history of First Peoples in television, *Something New in the Air*, Lorna Roth builds a four-phase history on the foundation of absence. Her first phase, the early 1900s to the 1970s, is characterized by “absences, misrepresentations, and stereotypes in film and print” and “southern-produced media from south to north.”²⁶ This says nothing of the fact that before the 1950s there were no televisions. Until at least the 1960s and arguably much later, radio dominated as a medium and Aboriginal people have used this particular form in myriad ways, as Rick Monture argues, to communicate, to resist and to build communities throughout the twentieth century.²⁷ And this explains little either about Aboriginal people in film. Such an approach suggests an urge to jump to the 1970s, rather than thoughtfully analyze those earlier foundational decades.

In critiquing the tendency of emphasizing absence, I do not deny the very real history of marginalization and colonization of Aboriginal people in Canada. Likewise, in

²⁶ Lorna Roth, *Something New in the Air: The Story of First Peoples Television Broadcasting in Canada* (Montreal and Kingston: McGill-Queen’s University Press, 2005).

²⁷ Rick Monture, “Sovereigns of the Soil”: Joseph Brant, Deskaheh, and the Haldimand Deed of 1784,” presented at the “What’s Next for Native American and Indigenous Studies” conference, Norman Oklahoma, Saturday 5 May, 2007.

emphasizing the state and modernity I do not advocate these as the only analytic tools for understanding the past. Nor am I suggesting, as others have, that a satisfactory “middle ground” between conventional understandings was ever reached. What I hope to do in this thesis is to show how marginalization and displacement could and did exist simultaneously with other experience, and that a history of decline or persistence, coercion or autonomy, difference or accommodation cannot adequately represent our past. The idea that we are limited to ‘either/or’ responses on the one hand to or to conciliation on the other is foundational to the ways our history is written.

One significant topic of history that resists the trend to skip over that “other” twentieth century is Second World War Aboriginal history, stimulated by veterans and popularized by P. Whitney Lackenbauer and others. To many Canadian historians, the war and the period immediately following it, is a watershed in Aboriginal history, marking a departure and gateway out of the “era of irrelevance.”²⁸ Indeed, new work that uses the war to frame larger issues such as the participation of Native people in the Canadian army, hitherto unattainable freedoms afforded by army life, the use of Indian territory to assert and protect Canadian sovereignty (and to test weapons as well), and the challenge to racialized precepts of Canadian citizenship made by veterans, has deepened our understanding of Indian modernity.²⁹

²⁸ See for example Donald B. Smith, “Aboriginal Ontario: An Overview of 10 000 Years of History,” in eds. Edward S. Rogers and Donald B. Smith, *Aboriginal Ontario: Historical Perspectives on the First Nations* (Toronto: Dundurn Press, 1994), 418–423, Olive Patricia Dickason, *Canada’s First Nations: A History of Founding Peoples from Earliest Times* 3rd Edition (Don Mills ON: Oxford University Press, 2002) and J.R. Miller, *Skyscrapers Hide the Heavens: A History of Indian-White Relations in Canada* (Toronto: University of Toronto Press, 1989).

²⁹ P. Whitney Lackenbauer, *Battlegrounds: The Canadian Military and Aboriginal Lands* (Vancouver: University of British Columbia Press, 2007) and Lackenbauer and Craig

This historical turn, however, is more or less missing in Aboriginal women's history. As Canadian Studies and Indigenous Studies scholar Grace Poulin shows, we should also pay attention to the gendered elements of this argument – does our interpretation of the war and its effects allow us to reserve Indian modernity for Indian men and the Canadian nation? While the title of her book *Invisible Women: WWII Aboriginal Servicewomen in Canada* suggests that the lives of Native women appeared irrelevant, its contents, based on the life histories of eighteen servicewomen, certainly do not.³⁰ Moreover, work by Native Studies scholar Robert Alexander Innes on Indian organizations points not to a historical watershed stimulated by returning soldiers but to longer histories of kinship, community and work which continued after the war.³¹ There are two things working here: the ability to simply forget what happened before and during the war, and the tendency to forsake Native participation and history by stressing the importance of changes in Canadian policy after the war, for instance, the Joint Committee of the Senate and House of Commons to Reform the Indian Act. Also, work on Aboriginal servicemen and women focuses on citizenship and claims on the state, not, except for a few statements, on why they joined in the first place – which was in many instances, I would argue, to work for wages.

When it comes to the “other” twentieth century, historians also simply reserve these years for scholars in other fields. Until recently, there seemed to be a fairly strict

Leslie Mantle, eds. *Aboriginal Peoples and the Canadian Military: Historical Perspectives* (Winnipeg: Canadian Defence Academy Press, 2007).

³⁰ Grace Poulin, *Invisible Women: WWII Aboriginal Servicewomen in Canada* (Thunder Bay: D.G. Poulin/Ontario Native Women's Association, 2007) and “Invisible Women: WWII Aboriginal Servicewomen in Canada” (MA Thesis, Trent University, 2006).

³¹ Robert Alexander Innes, ““On Home Ground Now. I'm Safe”: Saskatchewan Aboriginal Veterans in the Immediate Post-War Years, 1945–1946,” *American Indian Quarterly* 28: 3&4 (2004), 685–718.

limit on what topics could be analyzed historically, and what was considered history when it comes to Aboriginal people. For example, urban history, for the large part, is seen to be pretty strictly sociology, geography and Native Studies or Indigenous Studies territory.³² While some historians have begun to examine the city as a historical topic that involves Native history,³³ the tendency remains to isolate urban and reserve history, rather than draw them both into the same temporal sphere. Segregating communities as such, Native Studies scholars have argued, has tended to cast urban Aboriginal history as the source of loss, disjuncture, inauthenticity and error.³⁴ Others have challenged this division by looking at the idea of mobility and territory to re-examine the history of Indian people in ways that remap all Native space.³⁵ Community-based histories of

³² Sociologists like Edgar Dosman argue that Indians posed some kind of sociological and ethnological “dilemma” to cities while newer sociologists and geographers theorize on space and race, showing how certain spaces are made, or “mapped” over time as racialized through a process of, for Sherene Razack, the law, and for geographers like Cole Harris, colonial governance and white settlement. Edgar Dosman, *Indians: The Urban Dilemma* (Toronto: McClelland and Stewart, 1972), Sherene Razack, ed., *Race, Space and the Law: Unmapping a White Settler Society* (Toronto: Between the Lines, 2002) and Cole Harris, *Making Native Space: Colonialism, Resistance, and Reserves in British Columbia* (Vancouver: University of British Columbia Press, 2002).

³³ James B. LaGrand, *Indian Metropolis: Native Americans in Chicago 1945–1975* (Urbana: University of Chicago Press, 2002) and John Lutz, Byron King Plant, Jordan Stranger-Ross and Jon Anuik, “Native People in Canadian Cities,” panel presented at the 85th Annual Meeting of the Canadian Historical Association, 29 May 2006. Toronto is a significant focus for forthcoming work in this field. See Victoria Freeman “Indigenous Haunting in Settler Colonial Spaces: the Activism of Indigenous Ancestors in Toronto,” in Coll Thrush and Colleen Boyd, eds., *Phantom Pasts, Indigenous Presence: Native Ghosts in North American Cultures and Histories* (Lincoln: University of Nebraska Press, 2008) and work by Julie Negam.

³⁴ Karen Froman, “The Undercover Indian: Explorations in Urban Aboriginal Identity,” in eds. Denise Fuchs and Mary Jane McCallum *Intersecting Worlds: Rural and Urban Aboriginal Issues* (Winnipeg: St. John’s College Press, 2005), 13–22.

³⁵ Mirian McNab, Robert Alexander Innes, Rebecca Major and Anne Mease, “Territory, Movement and Theory: Towards a Critical Native Studies Pedagogy II,” papers delivered at the Native American and Indigenous Studies Conference, Athens, Georgia 10–12 April 2008.

Haudenosaunee high steel workers also provide an exception to this trend to cast modern urban Aboriginal labour as false. In this work, Indians represent work ethic, skill, and independence. They are modern working-class heroes, able to compete in the market place in ways that did not suggest loss or inauthenticity. The city and the high rise were merely the newer scene for an older warrior tradition.³⁶ The warrior image is an oft-repeated supplement to the modern urban context; however, it is one for which there is no female modern labouring counterpart.

If absent, the Second World War and cities are the background to a non-history of Native women and work, social science was what in many ways pathologized it. In the post-war period, the Canadian academic community was markedly more interested in doing studies and surveys about Aboriginal health, employment, housing and other matters than ever before. Two of the more well-known studies of these years were the Hawthorn Report and the Lagasse Report, both of which focused on economic conditions of Aboriginal communities. While the two reports had plenty to say about the “economic marginality” of Aboriginal people compared to the rest of the country, in both cases, Aboriginal communities were written about as if Aboriginal women did not exist, and when women did appear, they seemed to have little or no impact on Indian economic systems. The reports locate differences in social class as largely the choice of Aboriginal people to “retreat” – either from their own ancestors or from contemporary mainstream society. Studies in the social sciences about Aboriginal employment tended to be premised by cultural loss as if culture was forsaken for class, while those who studied

³⁶ Richard Hill, *Skywalkers: A History of Indian Ironworkers* (Brantford, ON: Woodland Indian Cultural Education Centre, 1987).

unemployment argued that Native dependence was a matter of personal or cultural choice.³⁷

Instead, historian Hugh Shewell argues that Native people were made as subjects and recipients of welfare in and through the study of social science.³⁸ He shows that economic marginalization and Canada's response, social welfare, are linked through the colonial regulation of people in the Indian Act to the appropriation of land starting with colonial settlement and continuing through to the mid-1960s. He and others have re-examined the language of "development" so popular in the post-war years. Shewell's book leaves room for other historians like me to investigate welfare's defining activity – work – as it pertained to twentieth-century post-war Indian community and economic development programs, employment programs and post-secondary education policy. In these investigations, Shewell rightly draws us closer to the state, and makes it culpable in the marginalization of Indigenous peoples rather than depicting this process as something Native people brought on themselves.

The State

The lack of material on modern Aboriginal labour history has resulted in part from a broader trend in Canadian history writing to dissociate Canadian history from its colonial past. Until recently, imperialism and Canadian nation-building have been understood as two distinct projects, often distinguished by the World Wars. However for Aboriginal

³⁷ For such an approach, see Terry Wotherspoon and Vic Satzewich, *First Nations: Race, Class and Gender Relations* (Saskatoon: Canadian Plains Research Centre, 2000).

³⁸ Hugh Shewell, *Enough to Keep them Alive: Indian Welfare in Canada 1873–1965* (Toronto: University of Toronto Press, 2004); see also "What Makes the Indian Tick? The Influence of Social Sciences on Canada's Indian Policy, 1947–1964," *Histoire Social/Social History* 34:67 (2001), 133–167.

people, the Canadian state functions in much the same way as empire and when I talk about the state, I am talking about Canadian nation-building as a distinct brand of colonialism. For this reason, literatures in the fields of both imperial history and the history of the Canadian state are used interchangeably in this thesis.

The Gender and Empire field, now responsible for what I think are the most exciting changes in imperial history, has been incredibly useful particularly in contextualizing Canadian nursing³⁹ and Aboriginal health⁴⁰ in imperial medicine, for example. This work is a departure from earlier historical scholarship that concentrated on the impact of imported European diseases and Western biomedicine on Native and Inuit populations, cultures and institutions and on the efforts of missionaries, traders, nurses and doctors to alleviate sickness in Aboriginal communities. Much of that work has come under criticism for failing to acknowledge the colonial context in which epidemics

³⁹ Historians in this field have considered the ways in which non-Native nurses have participated in and benefited professionally from colonialism, challenged the idea that imperialism is a male project only, looked at how outpost nursing was a transgressive space for non-Native nurses, and examined how notions of whiteness have influenced the development of the profession Birkett, "The 'White Woman's Burden,'" Laurie Meijer Drees and Lesley McBain, "Nursing and Native People in Northern Saskatchewan, 1930s–1950s," *Canadian Bulletin of Medical History* 18:1 (2001), 43–65, McPherson, "Nursing and Colonization," and Gilbert, "Great Adventures in Nursing."

⁴⁰ In Aboriginal health history, scholars have focused on the regulatory aspects of colonial health policy and as such have portrayed a disciplined, medicalized and ultimately passive Aboriginal patient population that peters out around 1960. Patricia Jasen, "Race, Culture, and the Colonization of Childbirth in Northern Canada," in eds. Veronica Strong-Boag, Mona Gleason, and Adele Perry, *Rethinking Canada: The Promise of Women's History*, (Don Mills: Oxford University Press, 2002), 355–366, Mary-Ellen Kelm, *Colonizing Bodies: Aboriginal Health and Healing in British Columbia, 1900–1950* (Vancouver: University of British Columbia Press, 1998), James B. Waldram, D. Ann Herring and T. Kue Young, *Aboriginal Health in Canada: Historical, Cultural, and Epidemiological Perspectives* (Toronto: University of Toronto Press, 1995), John and Jean Comaroff, *Ethnography and the Historical Imagination* (Boulder: Westview Press, 1992), chapter eight; and Maureen K. Lux, *Medicine that Walks: Disease, Medicine, and Canadian Plains Native People, 1880–1940* (Toronto: University of Toronto Press, 2001).

and non-Aboriginal healers prevailed, for overlooking Native and Inuit concepts of health and healing, and for casting Aboriginal people in reactive, passive roles remote from those of caregiver. The newer scholarship also provides a much-needed critique of current health sciences research in the Aboriginal health field which continues to produce Aboriginal health as a subject of racial determinism, deviance and discipline.

To put Aboriginal women's labour into its imperial context does not mean to focus again on the history of non-Aboriginal people, but rather to examine how discourses and experiences of Native women's labour furthered the intentions and aims of imperial rule, including the dispossession, domination and disempowerment of Indigenous people. It can also be a way of creating valuable new fields of inquiry that resist state-centred exceptionalism. While the Gender and Empire field was rooted in a project of restoring white, middle-class women to British imperial history, more recent work has sought to reframe topics in ways force a reckoning with Indigenous women's history, including studies on the impact of reform measures, women's resistance to imperialism and the impact of imperialism on women's status.⁴¹

The Gender and Empire field however, has focused on nineteenth-century British history and as a result, the relationship between colony and nation is sometimes unclear. One of the fields useful in linking empire and the Canadian state is the history of Canadian Indian policy. Several scholars have analyzed trends in Indian policy and

⁴¹ The complicated, but arguably more inclusive and analytical re-mapping of empire being done in the Gender and Empire field is demonstrated in work including, but not limited to useful edited collections published in the late 1990s such as: Ruth Roach Pierson and Nupur Chaudhuri, eds, *Nation, Empire, Colony: Historicizing Gender and Race* (Bloomington: Indiana University Press, 1998); Clare Midgley, ed., *Gender and Imperialism* (Manchester: Manchester University Press, 1998) and Antoinette Burton, ed., *Gender, Sexuality and Colonial Modernities* (New York: Routledge, 1999).

developed schemes for explaining change over time (and stasis) as it focused at different periods on different themes including protection, civilization, assimilation, integration, self-determination, cultural pride, marginalization, revival and devolution.⁴²

Such histories of Indian policy have sometimes been categorized as Indian politics as opposed to Indian history, in a way that is usually meant to signal one of two central debates: one about authentic Indian scholarship and the other about advocacy and objectivity. State history is indeed set in a polar dichotomy to Indian history, and because much of the scholarship on Indian policy is based on a social control model, including theories of surveillance, discipline and totalization, it indeed leaves little room for a discussion of Aboriginal people on their own terms. However, debates about the resistance and agency of Aboriginal people argue that policy outcomes cannot be assumed by its objectives and that the always unfinished work of policy truncates the project of colonization.⁴³ Moreover, we must not presume that Native people have no interest in or knowledge of the Canadian imperial state. The idea that Canadian Indian policy does not belong to Indian history assumes that these legal, political and social structures did not have a major impact on people's lives. The critique that one needs to write from an Indigenous perspective is important, however, and I would argue that the two need not be separate and mutually exclusive.

⁴² Again, some of the most useful articles on Canadian Indian policy exist in edited collections such as: Ian A.L. Getty and Antoine S. Lussier eds., *As Long as the Sun Shines and Water Flows: A Reader in Canadian Native Studies* (Vancouver: University of British Columbia Press, 1983); J.R. Miller ed., *Sweet Promises: A Reader on Indian-White Relations in Canada* (Toronto: University of Toronto Press, 1991) and Ken Coates and Robin Fisher, eds., *Out of the Background: Readings on Canadian Native History* 2nd Edition, (Toronto: Copp Clark, 1999).

⁴³ For an analysis of this debate as it is engaged in by Canadian historians, see Robin Brownlie and Mary-Ellen Kelm, "Desperately Seeking Absolution: Native Agency as Colonialist Alibi?" *Canadian Historical Review* 75:4 (1994): 543-56.

Those contributions to investigations of the state and modern Indian labour important to this project have looked at the way state power was exercised to marginalize Native people in or from the economy. These include work by Ron Laliberte, Donald Fixico and Sarah Carter. Laliberte, in his essays on sugar beet workers in the 1950s, demonstrates how the state recruited and coerced Aboriginal labour through policies such as withholding rations.⁴⁴ Donald Fixico's work on urban employment placement in the United States draws together aims of the state and Indian land policy with programs for relocation for employment in urban areas.⁴⁵ In Canada, the term relocation tends to refer to community relocations only, however, as I show in Chapter Three, there indeed was a Canadian counterpart to the program Fixico describes as there was for many imperial policies. Sarah Carter's *Lost Harvests: Prairie Indian Reserve Farmers and Government Policy* seeks to deconstruct a popular stereotype of Native people as inherently incapable of farming through an analysis of federal Indian farming policy from 1870 to the 1920s in Treaty Four territory. She finds that experienced Cree farmers were discouraged from developing a new farming economy through the Peasant Farming policy and the subdivision of reserves, both of which discouraged communal ownership of land and farm equipment, encouraged only subsistence farming and justified further

⁴⁴ Ron Laliberte, "The 'Grab-a-Hoe' Indians: The Canadian State and the Procurement of Aboriginal Labour for the Southern Alberta Sugar Beet Industry," *Prairie Forum* 31:2 (Fall 2006), 305–324 and Ron Laliberte and Vic Satzewich, "Native Migrant Labour in the Southern Alberta Sugar-Beet Industry: Coercion and Paternalism in the Recruitment of Labour," *The Canadian Review of Sociology and Anthropology*, 36 (1999), 65-86.

⁴⁵ Donald Fixico, *Termination and Relocation: Federal Indian Policy, 1945–1960* (Albuquerque: University of New Mexico Press, 1986) and *The Urban Indian Experience in America* (Albuquerque: University of New Mexico Press, 2000).

land surrenders, making the base on which to farm smaller and eliminating competition with neighbouring settler farmers.⁴⁶

Two structures of state power will be central to this thesis, the Department of Indian Affairs and the Department of National Health and Welfare, and in particular, the branches of these two departments that deal with administering to Indian health, Indian education and Indian employment. Briefly, the Canadian federal government assumed jurisdiction over Indian lands and Indian peoples in the British North America Act at Confederation. The state's operations in the field of health in particular were a matter of constitutional law, treaty obligation, compulsion and custom. The Indian Health Services underwent a gradual transformation from ad hoc local aid to a more centralized structure within the Department of Indian Affairs around the turn of the century and in 1945 transferred to a branch of the (then new) Department of National Health and Welfare. Here it was called the Indian Health Services Branch or the Medical Services Branch (these terms will be referred to interchangeably in this thesis) and is now called the First Nations and Inuit Health Branch, or FNIHB. In spite of a consistent position on the part of Native people that these services are owed to them by the state through treaty and custom, the MSB has maintained that it is not legally obligated to provide services to status Indian and Inuit people in Canada, but does so on a humanitarian and voluntary basis.

⁴⁶ Sarah Carter, *Lost Harvests: Prairie Indian Reserve Farmers and Government Policy* (Montreal-Kingston: McGill-Queen's University Press, 1990). Innes, Macdougall and Tough argue that in spite of these efforts, reserve agriculture did not decline in the years 1897-1915 in Saskatchewan, rather, in both Treaty Four and Six communities, more reserve lands were committed to agriculture. Rob Innes, Brenda Macdougall and Frank Tough, "Band Economies 1897-1915," in Ka-iu Fung, ed., *Atlas of Saskatchewan: Celebrating the Millennium* (Saskatoon: University of Saskatchewan, 1999): 60.

The Department of Indian Affairs, or DIA, was the federal department charged with implementing the *Indian Act*, which was a mid- to late-nineteenth-century consolidation of earlier colonial Indian policy, and outlined how the Canadian government would manage its jurisdiction over Indian lands and Indian peoples. First, the *Act* legally defined “Indian” and kept a register of status Indians. This is important because it set out the guidelines in terms of eligibility for treaty rights, participation in tribal government and access to Indian land and resources. This is also important because the *Indian Act* defined Indian women on different terms than men. By the *Act*, the definition of Indian extended to the wives and widows of all Indian men while it disenfranchised any woman married to a man who was not a status Indian. In losing Indian status, Aboriginal women who married non-Indians were forced to cut all ties to the band and renounce Indian status and rights. As such, by law, Native women who “married out” were excluded from their own communities. So were any children from this marriage.⁴⁷

The *Act* also defined “reserve,” outlined a set of regulations which applied to Indians and to Reserves, outlined how Indian land could be surrendered, outlined the management of Indian funds, imposed a system of governance onto First Nations (the chief and council system) and described the process of enfranchisement or the method of becoming Canadian citizens by signing over rights to land and legal status as Indians.

⁴⁷ For a discussion of gender discrimination in the Indian Act and Native women’s resistance to it, see Bonita Lawrence, *“Real” Indians and Others: Mixed Blood Urban Native Peoples and Indigenous Nationhood* (Vancouver: UBC Press, 2004). See also Sylvia Van Kirk’s discussion of how intermarriage is regulated in fur trade and settler colonial contexts in “From “Marrying-In” to “Marrying-Out”: Changing Patterns of Aboriginal/Non-Aboriginal Marriage in Colonial Canada,” *Frontiers: A Journal of Women Studies* 23.3 (2002), 1-11.

Enfranchisement was the legal embodiment of the department's philosophy of management: it aimed to revoke all Indigenous claims to the state by making Indigenous people legally invisible within it. In organizing these duties, the Department of Indian Affairs had a number of different branches dealing with, for example, education, welfare and lands management of Indians everywhere in Canada. A recent field of interest for historians has been the Department's system of primary education. In the early to mid-twentieth century, the Department's education operations spilled into the field of vocational training and employment, which will be the focus in this thesis.

The emphasis on the state in this thesis is not meant to downplay the argument several historians have made that the post-war period was one in which centralized federal power was devolved significantly to the provinces, a movement that is troublesome for many Aboriginal people whose primary relationship is with the federal crown. While the theory was ultimately to devolve power to the provinces, the Department of Indian Affairs and Health Canada remain federal departments charged with responsibilities to deliver education and health services to Indigenous people in Canada. For the most part, employment measures were by the 1970s handled by the provinces, however the provinces often engaged in cost-sharing "agreements" whereby Indian funds would be funnelled through programs built and managed by and for non-Aboriginal people. In the period under study, however, it remains that the federal government did desire to manage the employment of Aboriginal populations; it did undertake the responsibility of counting, regulating and defining Aboriginal populations; and it did play an important role in Aboriginal women's labour.

In part, this thesis seeks to clarify that role where possible. I will start in many of the cases in federal Indian schools, drawing out the clear role that Indian Affairs played not only in the training, but also the recruitment, contracting, disciplining and regulation of Native labour. Principals, Indian agents and teachers were critical figures in the process by which Aboriginal nurses, for example, accessed post-secondary education. Apart from formal education, health services for Status Indians and Inuit were administered federally as well and indeed, several programs for labour placement in this and other fields were conceived of and controlled at the federal level. In the four chapters which follow, I will outline some of these programs more thoroughly, and in the next section, I will explain how that will happen.

The Case Study

How does a historian begin to write a twentieth-century history of Aboriginal women and work? First off, I do not represent all Aboriginal women in this thesis. While geographically and culturally my interests spanned Manitoba (where I live) and Ontario (where I am from), I almost immediately moved outwards, through the connections of professional organization, federal labour programs and the mobility of Aboriginal women workers themselves. Unfortunately, there was no single set of records I could refer to when researching the history of Native women and work, so I went to a number of places. Practically, the research ended up focusing on women who are Registered Indians (but its findings are not limited to this group) in continental southern, English-speaking Canada, and, with the exception of the Community Health Representatives, most of the women I will be talking about were young adults. Most were funded or placed by Indian Affairs,

declared themselves of Indian ancestry, and/or worked for the government. The study is therefore painfully and problematically dependent upon a colonial system of identification that aimed to integrate, segregate and penalize Aboriginal people and I call attention to the fact that there were many more Aboriginal women who for various reasons and in various ways, sought to resist this system and succeeded.

The thesis has taken on the form of four case studies, each of which follows a particular occupation or field and highlights the interaction of the key interrelated frames of labour, modernity and the state in Aboriginal women's history while offering a critique of the condition of Aboriginal history in Canada. A case study approach has afforded the opportunity to use a combination of different methods, sources and topics. All of the case studies consider different employment training and placement programs of varying duration and geographies, and provide an understanding of the ways in which the state involved itself in Aboriginal women's lives. These programs serve different functions in the chapters, sometimes only as points of reference for other stories about Aboriginal women and work. The case studies are set roughly chronologically in relation to each other.

Chapter Five, on Aboriginal nurses, came first, and in many ways influenced the directions that the thesis took thereafter. While a background in the history of Indian education was an inspiration for the research, an interest in Aboriginal health and federal health policy in the post-war period was the real starting point. In this research, I grew frustrated with how the Indian Health Service was written as heroic and expansionist without reflecting on how it relied on equally simplistic images of Aboriginal people as isolated and sickly dependents. That inspired me to study the "invisible" labour of

Aboriginal people who worked in a number of paid healthcare positions both inside and outside of the Medical Services Branch.⁴⁸ The case study on Aboriginal nurses examines over thirty years of Aboriginal nursing history through themes developed by the Registered Nurses of Canadian Indian Ancestry (RNCIA, now the Aboriginal Nurses Association of Canada or ANAC), namely, Native people's involvement in public health issues, employment in the Medical Services Branch and post-secondary education.

In modern Aboriginal women's history, there is always more evidence for invisibility than for visibility, for silence rather than voice, but it is worthwhile examining how this silence and invisibility get made and then translated into knowledge about our recent history. In the chapter on nursing, therefore, I show that the organization's objectives highlight a history of engagement in education, health and employment, and draw our attention to the ways in which Aboriginal people cast those experiences at a time of noted Indian political activity.

The sources and methods I use in the nursing case study closely overlap. Initially inspired to write about nurses through RG 29 (Health Canada) files, my interest in these records waned due to the restrictions put in place by Access to Information and Privacy laws. I gathered what I could from the records I could gain access to, wrote an essay on Aboriginal nurses in the Medical Services Branch and shared it with the ANAC. In response, I was asked to write a more substantial document on the history of Aboriginal nurses for the organization. That work involved researching nursing records at its headquarters in Ottawa (which included newsletters, conference programs and published

⁴⁸ Laurie Meijer Drees, "Training Aboriginal Nurses: the Indian Health Service in Northwestern Canada, 1939–1975," paper delivered by special invitation to the Hannah Conference in the History of Medicine, University of Ottawa, June 2005, 3.

materials) and a group of ANAC records at the National Archives (a collection of restricted documents that included a survey of Aboriginal nurses undertaken in the early 1980s, membership applications and minutes of meetings). All of these records were collected, organized and managed by the ANAC. The research also involved conducting seven interviews with Native nurses connected to the organization and developing a four-phase history of Aboriginal nurses in Canada in the twentieth century. This project, including the research that went into it, will be referred to in this thesis as *Twice as Good: A History of Aboriginal Nurses*. In doing this project, I was able to get invaluable feedback on my work from leading Aboriginal nurses throughout the country. I was also able to provide the organization with a working list of Aboriginal nurses I had gathered in my research to add to their records.

My approach to the study of the Aboriginal women's history of mid-twentieth century is to use both interviews as well as written records. This was partly out of common-sense and partly because I believe oral history can be a method of responsible historical research. Oral history is often considered by disciplinary historians as the reverse of the written record: either false and subjectively adulterated 'hear-say' or the only method of documenting 'true' experience.⁴⁹ Likewise, the use of oral history has been a central subject of methodological debates about the nature of our work as historians: is our job to locate truth about the past or is it to examine how our past is understood in the ways we can and cannot speak about it? Each side of these debates creates its opposite, however, this particular resource has been increasingly seen to exist

⁴⁹ For a more elaborate discussion of oral history method, see Julie Cruickshank *Life Lived Like a Story: Life Stories of Three Yukon Native Elders* (Vancouver: University of British Columbia Press, 1990).

in isolation such that oral history often unquestioningly signifies a project's ethics, method and validity. This does little more than reproduce the binary of falseness and truth, experience and discourse, partial and complete, absent or present. With this in mind, I will now provide some commentary on how I used oral history and contextualize the interviews I conducted for this research.

For my own work, interview and archival research were not isolated but inter-related: those who I interviewed were named in and had themselves created written records and I often read records like the RG 10 (Indian Affairs) files housed at Library and Archives Canada as well as contemporary current affairs periodicals including the *Indian News* with individuals and interview questions in mind. There were two different kinds of interviews undertaken in this thesis. The first was the interviews I conducted for the ANAC for the history of Aboriginal nursing project. I invited sixteen nurses affiliated with the ANAC to participate by mailing out a short description of the project. Of that number, seven responded. I asked them a series of general questions related to their education and employment experiences as well as a number of more direct questions regarding their individual careers in nursing. These interviews were done over the phone (one was done also by e-mail) and without a recording device. After writing up my notes, I returned them for editing. At that stage one nurse withdrew. Once the interviews were edited, the ANAC asked each participant to sign a form giving the ANAC permission to own the rights to the interview. At that stage, another nurse withdrew. The five remaining interviews were with Carol Prince, Faye Isbister-North Peigan, Marilyn Sark, Marilyn Tanner-Spence and Rosella McKay and these interviews are held at the ANAC headquarters in Ottawa.

Carol is a Cree nurse from Nelson House, Manitoba whose career has included psychiatric nursing, general duty nursing, primary care and community health nursing, teaching, and health research and acting as Special Advisor to the Assistant Deputy Minister of Health Canada and as Chief Executive Officer and Director of Nursing at the Nelson House Personal Care Home. Faye grew up in northern Saskatchewan, holds an RN as well as an MA from Red Deer College in Alberta and has worked ICU, cardiac, general, community health and home care nursing, as a nurse manager in North Eastern Alberta and in her own community as a health administrator/supervisor and in the field of community development in health. Marilyn Sark was one of the first Aboriginal women to earn a Bachelor of Science in Nursing, completing the degree in 1963 (Mount St Vincent University and Halifax Infirmary). Among other roles, she has worked in general duty, surgical and acute care, teaching, as a band-employed Community Health Nurse for Lennox Island and at an Ambulatory Detox Unit. Marilyn Tanner-Spence is from Manitoba and holds a RN from Red River College, Thompson, a BScN and from the University of Manitoba and a MA from the University of Victoria. She worked at the Thompson General as well as in outpost nursing as a field nurse and in public health. She helped to establish a nursing program in Norway House, Manitoba. Rosella McKay is from Kahkewistahaw First Nation in Saskatchewan and holds a diploma and a Bachelor of Science in Nursing from the University of Saskatchewan. She has worked for the First Nations and Inuit Health Branch and for the province of Saskatchewan and she also taught at SAIST.

The second kind of interview I did for this thesis was not through the ANAC history of Aboriginal nurses project. In my own research about the history of Aboriginal

nurses, several nurses stood out for their community recognition in Manitoba. Of these, three followed up on requests for interviews, Ann Callahan, Eleanor Olsen and Ruth Christie. Two of these interviews were tape recorded and the third was recorded by hand. All went through a process of editing and follow-up. Unlike the ANAC interviews, each of these women are retired from nursing and each are Elders. Ann Callahan was active with the ANAC and I had heard a lot about her as she is well-known in Winnipeg not only for her work in the health care field but also for her work in education. She was recently honoured by having a building at the Health Sciences Centre named after her. She is from Peepeekisis Nation, Saskatchewan and worked as a nurse's aide at the Fort Qu'Appelle Hospital before earning an RN diploma at the Winnipeg General Hospital in the 1950s. She also holds a BA in Psychology and an Interdisciplinary MA from the University of Manitoba which was based on interviews with the oldest living generation of the File Hills Indian Residential School.

Eleanor was recently honoured by Ka Ni Kanichihk. She worked in the Diet Kitchen at Norway House Hospital before earning her LPN and working at Fisher River Hospital in Peguis, Percy E. Moore Hospital in Hodgson, Manitoba and served the Peguis community for many years in the local clinic. Eleanor was interviewed with two friends and relatives, Peggy Hedges and Kathy Bird, a Community Health Nurse working in the Traditional Healing Program, Peguis Health Services. Together, they told stories related to the various questions about Eleanor's early education and her career in nursing.

Ruth Christie is from Loon Straits, Manitoba and trained as an LPN at St. Boniface Hospital and worked at Hybord, Grand Rapids as well as at Peguis, St. Boniface and Selkirk. When I interviewed her, she was working at Lower Fort Garry National

Historic Site as a park interpreter and her interview focused on childhood stories, her family history as well as her experiences of nursing education and work. Ruth has also taken me canoeing around Loon Straits, and over many lunches, visits and tours, has taught me more about the religious, cultural, social and political histories of Winnipeg, Selkirk and Lake Winnipeg.

The approach during the interviews was to loosely follow a set of questions, to try to find a balance in following and leading them, and to follow up with additional questions and corrections when necessary. The questions focused on women's experiences in education, obtaining employment and work, but the answers often did not. All of the interviews followed the specific instructions and guidelines of the participants with regards to the ethics of asking for and sharing knowledge. The interviews were also conducted according to Tri Council ethics guidelines. I also corresponded with Myrna Cruickshank, a LPN from near the Pas who lives in Scotland. Myrna had worked with the Indian Health Service in Norway House Hospital and elsewhere including the St. Vital Sanatorium, in Beausejour and in First Aid service in South Indian Lake. Most of the individuals contacted for interviews were reached through organizations, with the help of Mary Young at the University of Winnipeg, Leslie Spillett at Ka Ni Kanichihk, Dr. Judith Bartlett, and the Aboriginal Nurses Association of Canada.

Oral history collected by others was also consulted and used in the research. These histories focused on individuals and their life experiences and ranged from an interview by the Department of National Defence, to published academic work, to Aboriginal journalism to general collections of profiles of Aboriginal people meant for a broad Aboriginal and Canadian audience. These works, as well as the interviews I

conducted, were meant for the purposes of gaining a better understanding of the lived lives of Aboriginal women in the twentieth century. They were extraordinarily helpful for providing historical context as well guidance as to what questions are important to ask of the history of Aboriginal women. They also familiarized me with certain narratives meant to organize, explain and teach about Aboriginal women's experiences of post-secondary education and work. For example, there is a way in which Aboriginal women describe their experiences of discrimination and racism in the mid-twentieth century. Many speak of being non-assertive when starting out and not knowing how to respond to inappropriate remarks. Many balance stories of racism with stories about people who advocated for or supported them.

In all of the four case studies, there were several unsuccessful attempts at arranging interviews. For connections to these individuals, I relied heavily on representatives of organizations, whose work in this regards was voluntary and above and beyond their daily workload. Moreover, genuine disinterest in the project, straightforward (and in some cases reasonable) anti-intellectualism, distance as well as ill health made it difficult to generate and maintain the connections necessary for some of these and other interviews. The period of this dissertation meant that many of the individuals I was writing about are still living, however in recent years, several of the individuals central to this particular history of Aboriginal women and work have passed on. The memories of these individuals – written and spoken – are also narratives about the history of Aboriginal women and work. Also, I have yet to frame the topic of domestic service work in a way in which women who worked in this field can readily identify with it. I had hoped to undertake interviews with a number of CHRs, with a Winnipeg hairdresser

about the placement of Aboriginal hairdressers in her father's hair salon and with a group of Bahá'í friends of Ethel Martens about her life and work. These are now impending lines of further investigation.

The nursing chapter is an effort to provide a general history leading up to the founding of the RNCIA. It takes as a starting point three goals of the organization, to improve Aboriginal health, nursing education employment in the healthcare field, and works backwards to contextualize these goals in a longer past. Invaluable to developing this history was presenting it to various communities including the Manitoba Association of the History of Nursing, the Aboriginal Nurses Association of Canada, the Winnipeg History of Medicine group and at the Labouring Feminism conference held at the University of Toronto in 2004.

Importantly, in mere numbers, Registered Nurses were a minority among Aboriginal people working in healthcare, and especially among those who worked at hospitals. Far more prevalent were nurses' aides, ward aides, hospital workers and interpreters, about whom records are harder to find. Broadening the scope of the study seemed to make sense. Knowing that I would be crossing a lot of important boundaries that distinguish accredited nurses historically and professionally from domestic service, I found it impossible to discuss nursing without including those who worked in non-licensed roles. This is why I eventually turned to the topic of Native women and domestic labour, which is explored in the chapter that follows this introduction, Chapter Two.

Chapter Two begins with a discussion of the connection between federal Indian education policy, girls' curriculum and girls' employment, particularly in residential

schools and Indian hospitals. Much of this is based on secondary literature on the Indian residential school system, RG 10 (Indian Affairs) records and Native women's literature from the 1970s and '80s about schools, girlhood and the process of raising consciousness about Indian identity. The second part of this chapter deals with a program run in the early to mid-1940s by the Department of Indian Affairs to place Aboriginal students from three schools in northern Ontario as domestics in Ottawa. Several themes significant to Native women's working history arose in this set of records, including family involvement in the decision to work; clothing and transportation; working conditions; the homes; ward status and wage labour; and sexuality, reputation and regulation in an off-reserve setting.

The sensitive nature of some of the material in the RG 10 archives was surprising, especially considering that the Access laws had prevented me from seeing what was in fact mundane material in the RG 29 (Health Canada) records. When writing, I therefore used some discretion when it came to names and some of the details in these records. At all times while researching the history of Aboriginal women and work I was aware of recent debates in my field about ethics including the censoring of unethical primary source material, ownership and ultimate applications of the research and control over rights to consult and utilize material. I was aware for example of how access restrictions tend in practice to favour the primarily non-Aboriginal history research labour of the departments of federal and provincial governments, legal council and firms such as Public History Inc., which are more readily and thoroughly able to access documents. Likewise, Tri Council guidelines for ethical academic research are constructed with primarily non-Indigenous academic researchers in mind. This produces results which can

in practice flatten or even prohibit more complex research questions and limit the types of research questions to those that suit the status-quo.

Being relatively sensitive to paternalism, patronizing language, colonial discipline and control, I looked to secondary sources for help in interpreting this material. In particular, anthologies by Indian academics and professionals published in the 1970s were helpful in this respect, as was a special issue of *Frontiers* on the history of domestics. Presenting my work to the scholarly, but no less labouring, community of the Native American and Indigenous Studies Association was invaluable, as were the many ‘on-the-house’ critiques, contributions and conversations of an informal network of Indigenous scholars from Auckland to Saskatoon.

While using the RG 10 records about vocational training and work, I kept coming across references to the Indian Placement and Relocation Program. Chapter Three focuses on this program, which was run by the Department of Indian Affairs from 1957 onwards. The first part of the chapter describes the program, showing how it was built upon the aims of the Canadian state to permanently integrate Aboriginal people by urban relocation and employment. The second part deals with one particular profession the program encouraged, hairdressing. Using work on race and the beauty industry in the United States, I was able to draw out some of the complexities surrounding beauty, authenticity, nationalism and labour particular to Native people in Canada.

In this chapter I use a combination of discourse and material analysis and structuralism. In many ways, the Placement Program was about structure: operations, wages, housing, transportation; but it did not exist apart from colonial discourse on integration and ideas about the Indian at work, the Indian and the city, and the Indian

woman. That discourse is made by the material circumstances of colonialism – the theft of resources and land – but also by the cultural impositions of imperialism. Structural management involved discourses of conquest, racial superiority and discipline. In the case of Aboriginal people in this thesis, they live within both discourse and material circumstances.

The records on the Placement and Relocation program mostly consist of labour surveys, studies, case files and Indian Affairs' favourite, forms. These forms can only really provide a limited number of details, and only within a starkly employment-focused structure of a colonial institution. In another section of the archives, there were also files of Indian Affairs and Health Canada photographs dealing with vocational training and placement. I had originally looked at these photographs when researching the ANAC book, but many also pertained to the Indian Placement and Relocation Program as well as the Community Health Representatives program I describe in Chapter Four. As starkly different as the glossy 8x10s of pretty, uniformed and smiling white nurses were from the little squares of nervous, small-moustached white-man bureaucrats before them, the vocational training photograph also provided me with yet another point of entry into the topic.

Here I found a picture of my mother, who had trained as a teacher in London, Ontario, and taught at the reserve day school in Munsee, Ontario, in the 1960s. She was in her early twenties, wearing a mini-skirt and a mod hairdo, with a trademark wad of tissue in her pocket. The clock read 2:30, and with a spelling list on the blackboard and chalk stains up and down her side, she looked like Indigenous methodology was not likely foremost on her mind. But it sure was on mine. There she was, among

photographs of Licensed Practical Nurses and electricians and stenographers and community health workers, the black-and-whites of those odd, post-war Departmental employment and training programs that I was trying to write about. What did it mean that in that context my mom was supposed to be embodying Indian policies of self-sufficiency and integration, which, in other readings, also stood for assimilation and loss? When I asked my mom about the picture, what she recalled was a conversation she had had with a fellow student in teachers' college who asked her, "Why on earth would you want to work on a reserve?" Also, she asked me if I was not perhaps in a labour placement program myself!

Outside of historical monographs, literature on Indian people and work exists in thick books by sociologists or thin, bulleted studies by consultants for the federal government, reminding us of how the government is invested in counting, measuring and tracking Indian labour. Photography, television, radio, film, comics and novels were all important sources complementing this record of Indian labour, not only because these sources are more interesting to this social historian, but also because they often provide important humanized and personalized historical insight on an otherwise state-centred record of the twentieth century.

I became interested in the Community Health Representatives (CHR) program while studying nurses, and found again that most of the records pertaining to this program were restricted at the archives. Having a fairly good idea about the Medical Services Branch history already, this program intrigued me because it was meant to be supervised by nurses. It also intrigued me because it was so different from other formalized training programs. The CHR program grew out of efforts in community

development and health improvement instigated at the international level and brought to Canada by Ethel Martens, then the Health Educator in the Medical Services Branch. The program is characteristic of how the federal government viewed the average Indian as a potential student of health and as a health worker. Program materials are extraordinarily explicit about how to teach, hire and employ Indians, and thus the program is a critical addition to this thesis. In other words, to me, it was worth the wait at the archives for these particular records to go through the ATIP process.

Particularly important to this research was presenting it to researchers affiliated with the Centre for Aboriginal Health Research at the University of Manitoba and beyond. I found some reluctance to take the history of the program seriously, especially from doctors, noting that the hierarchy in medicine is still alive and well in Manitoba. What struck me about this program was not just the racialized labour hierarchy (white professionals, Indian para-professionals) but how patriarchy was institutionalised in the program. In this chapter I use a feminist approach to analyze the early history of the CHR program. This approach asserts that ideas about the nature of womanliness and manliness have made for inequalities in labour that subordinate women in patriarchal societies. Taking up Indigenous feminists' call for "feminism without apology,"⁵⁰ this chapter speaks to those in Indigenous history who continue to view feminist approaches as not authentically Indigenous and therefore essentially worthless. "Such a position," Jennifer Nez Denetdale argues, "fails to name the colonial space in which ... women find

⁵⁰ Andrea Smith, "Native American Feminism," 96.

themselves and the way in which a history of colonization has wreaked havoc in their lives while they also struggle to reclaim their lives, culture and history.”⁵¹

When I originally wrote about the CHR program I was interested in the content of federal health service and education for Aboriginal people. I found out about lots of things I did not know about before including the Clean-Up Campaign on the '60s reserve; that health was a matter of 'attitude'; that the National Film Board and Indian Health Services both unashamedly advertised for and promoted the Milk Foundation, the Canadian Dental Association and the Canada Food Guide not to mention the Hudson's Bay Company store; I learned how to work 'with' and not 'for' an MSB nurse and an Indian agent; I learned how to freehand a steamy pork chop, how to motivate Indian communities and how to bridge the race and class gap between Indians and health professionals. I wrote a paper on these things and shared it with Debbie Dedam-Montour, Executive Director of the National Indian and Inuit Community Health Representatives Organization, who graciously read it and provided corrections, feedback and direction. This paper became an introduction to the CHR chapter, which then explores in more detail the role that gender played in the selection, training and supervision of Community Health Representatives.

There are a few lacunae in this thesis: I do not, for example, deal with teachers, doctors, lawyers and social workers. Originally, the thesis grew out of an interest in Indian health, and so I was most firmly grounded in that literature and oriented best to contribute to it. Also, I am not going to trace a creation or recreation of a twentieth century Aboriginal middle class in this thesis. I will be dealing with some issues of

⁵¹ Jennifer Nez Denetdale, "Chairmen, Presidents, and Princesses: The Navajo Nation, Gender, and Politics of Tradition," *Wicazo Sa Review* 21:1 (Spring 2006), 26, n. 46.

labour and professionalization, which could be seen as part of middle-class formation, but that is not my primary concern here. I do not believe, as some have argued, that Aboriginal and middle-class are mutually exclusive, however I have not yet formulated arguments about this process or the wider implications of it. I also do not look at resource-based or farm labour, mostly because I originally conceived of this project being based on post-secondary training and education programs. However, they are important fields of inquiry, and had a significant presence in the records I came across.

The four case studies which follow are about domestics, hairdressers, Community Health Representatives and nurses and are not meant to limit or to complete a history of Aboriginal women in Canada. Instead, they are meant to challenge historians and others to think about twentieth century Aboriginal women's history in new ways and open new avenues for further scholarship in these and other ways Aboriginal women worked and lived. This thesis will show that Native women's twentieth-century wage labour was shaped in part by the workings of state power in the fields of education and labour. It will also insist that Native women were not 'displaced' by modernity, but rather laboured in modern Native ways from the 1940s to the 1970s, a period of tremendous change.

Chapter Two

Sweeping the Nation: Aboriginal Women and Domestic Labour in Mid-Twentieth Century Canada

The title of this chapter comes from a comic strip I came across in a 1972 issue of *The Forgotten People*. In the first frame, a long-haired, bell-bottomed Indian with a feather in his hair comes across a Red Power poster with the clenched fist and the message: “The Indians are sweeping this country!!!” In the next frame, you see him scribbling away on the wall beside the sign so that by the third frame, beside “The Indians are sweeping this country!!!” it reads, “That’s the only job they can get!”¹ This chapter is about domestic labour in mid-twentieth-century Canada. First, it will outline key historiographical arguments in the field of domestics history. Second, the chapter will argue that the Department of Indian Affairs’ industrial and boarding schools were training grounds for domestics by demonstrating how labour-based curriculum and Indian education policy and practice fed directly into waged domestic work in federal institutions and the private homes of those associated with them. Last, it will examine how the Indian Affairs department engaged in the placement of Native domestic labour by examining a group of RG 10 (Indian Affairs) records about a small program the department ran in the early to mid-1940s. While investigating that program, I will draw out several themes including family involvement in the decision to engage in domestic labour; federal provisions of clothing and transportation to domestics; working conditions and the homes; ward status

¹ Denise Rudniki, *Digger, The Forgotten People* (Summer 1972), 3.

and wage labour; and sexuality, reputation and DIA regulation of Indian women in an off-reserve setting. This chapter will show that the Department of Indian Affairs was involved not only in training Aboriginal domestics in its schools, but also in recruiting, contracting, supervising and regulating Native women's domestic labour, ensuring that it was, indeed, one of the only readily available jobs they could get.

Race, Aboriginal Women and Female Household Labour

There are two main forms of Native domestic labour that have been acknowledged in historical scholarship. The first is the celebrated domestic work of Indigenous women guides who oriented the disoriented in the domestic spaces of Indigenous territory. This work focuses on not-quite-yet settler societies of the fur trade west in the eighteenth and early nineteenth centuries and the "Canadian North" in the twentieth. Literature from the early 1980s is characterized by euphoric "discovery" of Native women in the archive by historians and the possibilities that marriage *à la façon du pays* raised of biculturalism, Indianization and influence, particularly in the domestic sphere (for example in child-raising practices). The form of work is analyzed as a feature of Native-Newcomer Relations informed primarily by gendered relations of class, race, imperialism and modernity, but which also took on local character contingent on place and culture. The possibilities opened by these relationships were then closed through the historical agency and historical focus on white women's predominance and white men's needs or preferences. A current trend towards anti-conquest narratives that centre on white women's vulnerability further obfuscates a history of Native women's labour and inter-

racial relationships.² Native people point to this type of work as the thankless, unrecognized but essential labour of helping strangers to adapt to their territory. Indigenous framings of this work are often followed by accounts of colonial crookedness – greed, deception and theft – that resulted in extreme hardship for them. This type of domestic work is not framed as waged labour, and in other circles, where it is recognized as skilled and essential, it is sometimes referred to as “knowledge translation.”

Sometimes this early domestic labour is cast as part of the work of larger cultural and spiritual conversion to Christianity. There is among mission historians, a noted interest in Aboriginal women’s experiences among missionaries, especially the Protestants, and particularly in B.C. While an earlier emphasis on cultural and religious assimilation or conversion (ie, the success or lack of success of the mission) has made for an emphasis on cultural conflict, newer work focuses on conversion and the changing status of Aboriginal women, Aboriginal women’s respectability and Aboriginal women’s

² See for example: Jennifer S.H. Brown, “A Cree Nurse in a Cradle of Methodism: Little Mary and the Egerton R. Young Family at Norway House and Berens River,” in Mary Kinnear, ed., *First Days, Fighting Days: Women in Manitoba History* (Regina: Canadian Plains Research Centre, University of Regina, 1987), 18–40 and *Strangers in Blood: Fur Trade Company Families in Indian Country* (Vancouver: University of British Columbia Press, 1980); Sylvia Van Kirk, *Many Tender Ties: Women in Fur Trade Society 1670–1870* (Winnipeg: Watson and Dwyer, 1980); Patricia A. Roome, ““From One Whose Home Is among the Indians’: Henrietta Muir Edwards and Aboriginal Peoples,” in Sarah Carter, Lesley Erickson, Patricia Roome and Char Smith, eds., *Unsettled Pasts: Reconceiving the West through Women’s History* (Calgary: University of Calgary Press, 2005), 47–78; and Joan Sangster, “Constructing the “Eskimo” Wife: White Women’s Travel Writing, Colonialism and the Canadian North, 1940–60,” in Magda Fahrni and Robert Rutherford, eds., *Creating PostWar Canada: Community, Diversity and Dissent 1945–1975* (Vancouver: University of British Columbia Press, 2007), 23–44.

connections to female reform work through their contributions to church organizations, preaching and interpreting the Christian message, and their female household labour.³

There is a stark difference between the ways this type of labour is depicted and the second form that has been the subject of historical investigations: the work of Indigenous women in their own homes and the targeted policies to reform Indigenous women's domestic sphere. In the US, the study of the history of Indigenous women's domestic labour is mostly located in the Native American Studies, Anthropology and Ethnohistory fields, where it is most often studied as either subject and object of a material shift in status or as change or consistency between tradition and modernity. Their labour often appears as static "women's roles," and women themselves as remote economic figures with neither a social nor a political history.⁴

³ Margaret Whitehead, "A Useful Christian Woman': First Nations' Women and Protestant Missionary Work in British Columbia," *Atlantis* 18 (1994), 142–166 and Carol J. Williams, *Framing the West: Race, Gender and the Photographic Frontier in the Pacific Northwest* (Don Mills ON: Oxford University Press, 2003), chapter 3 and "She was a means of Leading into the Light': Photographic Portraits of Tsimshian Methodist Converts," in Mary-Ellen Kelm and Lorna Townsend, eds., *In The Days of Our Grandmothers: A Reader in Aboriginal Women's History in Canada* (Toronto: University of Toronto Press, 2006), 117-145.

⁴ See for example: Patricia Albers and Beatrice Medicine, eds., *The Hidden Half: Studies of Plains Indian Women* (Lanham, MD: University Press of America, 1983), Ellice B. Gonzales, *Changing Economic Roles for Micmac Men and Women: An Ethnohistorical Analysis*, National Museum of Man Mercury Series: Paper 72 (National Museums of Canada: Ottawa, 1981), Somer Brodribb, "The Traditional Roles of Native Women in Canada and the Impact of Colonization," *The Canadian Journal of Native Studies* 4: 1 (1984), 85–103; Laura Klein and Lillian Ackerman, eds., *Women and Power in Native North America* (Norman: University of Oklahoma Press, 1995), Nancy Shoemaker, ed., *Negotiators of Change: Historical Perspectives on Native American Women* (New York: Routledge, 1995), Theda Perdue, *Cherokee Women: Gender and Culture Change, 1700–1835* (Lincoln: University of Nebraska Press, 1998) and Colleen O'Neill, "The 'Making' of the Navajo Worker: Navajo Households, the Bureau of Indian Affairs, and Off-Reservation Wage Work, 1948–1960," *New Mexico Historical Review* 74:4 (October 1999), 375–405.

The literature coming out of two fields, Gender and (British) Empire and Gender and the American West, on the other hand, frames domestic labour as nineteenth- and early twentieth-century women's imperial history and focuses on how the home, like Gail Bederman's American white male body, came to represent a host of ideas about gender and race, in this case to do with civilization in an imperial settler context.⁵ This literature demonstrates how Indigenous homes were imagined as the locus of backward and pathological Indigenous cultures, and as such were targets of broad imperial sexual, moral and social regulation programs that implicated white women as activists and workers (but rarely as employers) alongside colonial governments. Jane E. Simonson's *Making Home Work* brings this scholarship to date and in many ways typifies the field in that it focuses on the late nineteenth and early twentieth centuries, centres on discourses of home and moral uplift, and maintains that the project of domestic assimilation was indelibly linked to colonization and white settlement in a women's west. Like most of the literature, however, it does little to acknowledge the family itself, including white or Native men, though this theme continued to inform Indigenous women's domestic labour through the twentieth century.⁶

⁵ Gail Bederman, *Manliness and Civilization: A Cultural History of Gender and Race in the U.S. 1880–1917* (Chicago: University of Chicago Press, 1995).

⁶ Jane E. Simonsen, *Making Home Work: Domesticity and Native American Assimilation in the American West, 1860–1919* (Chapel Hill: The University of North Carolina Press, 2006), Margaret D. Jacobs, *Engendered Encounters: Feminism and Pueblo Cultures, 1879–1934* (Lincoln: University of Nebraska Press, 1999) and “Working on the Domestic Frontier: American Indian Domestic Servants in White Women’s Households in the San Francisco Bay Area, 1920–1940,” *Frontiers* 28:1 and 2 (2007), 165–199, Joanne Scott and Raymond Evans, “The Moulding of Menials: The Making of the Aboriginal Female Domestic Servant in Early Twentieth-Century Queensland,” *Hecate* 22:1 (1996), 139–57, Victoria Haskins, “On the Doorstep: Aboriginal Domestic Service as a ‘Contact Zone’” *Australian Feminist Studies* 16:34 (2001), 13–25 and “Domestic Service and Frontier Feminism: The Call for a Woman Visitor to ‘Half-Caste’ Girls and Women in Domestic

Two other forms of Native women's domestic labour were prominent in the twentieth century. These two will be the focus of this chapter. The first is Native women's domestic labour at colonial institutions such as schools, hospitals and the homes of the non-local and mostly migratory or itinerant workforce of church and government officials. This waged work is made invisible as assumed, as essential and as a seamless transition from manual training in school. It is important to look at this labour and in this era because it is so obviously related to troubled Indigenous economies resulting from the colonization of homelands and coercive federal Indian policies.

The second form is Native women's domestic labour in private homes, hotels and tourist resorts, non-Indian hospitals and homes for the elderly. This form of waged labour in the mid-twentieth century was obtained either through the state or by Indigenous women themselves. It is difficult to envision how domestic labour fit into an Indigenous economy because it seems to suit settler ones so seamlessly. Economically, it was, like men's involvement in waged labour, often part of an overall economic strategy that combined various kinds of labour. For many, it was a means of escaping the poverty of exhausted family economies and alleviating the pressures upon them.⁷

Service, Adelaide, 1925–1928,” *Frontiers* 28:1 and 2 (2007), 124–194, Albert L. Hurtado, “Hardly a Farm House – A Kitchen without Them”: Indian and White Households on the California Borderland Frontier in 1860,” *Western Historical Quarterly* (July 1982), 245–270, Pamela Margaret White, “Restructuring the Domestic Sphere – Prairie Indian Women on Reserves: Image, Ideology and State Policy 1880–1930,” (Ph. D. Diss., McGill University, 1987), Sarah Carter, *Capturing Women: The Manipulation of Cultural Imagery in Canada's Prairie West* (Montreal: McGill-Queen's University Press, 1997), and Devon A. Mihesuah, *Cultivating the Rosebuds: The Education of Women at the Cherokee Female Seminary, 1851–1909* (Urbana: University of Illinois Press, 1993).

⁷ See, for example, Stephen High, “Native Wage Labour and Independent Production during the ‘Era of Irrelevance,’” *Labour/Le Travail* 37 (Spring 1996), 243–64, Robin Jarvis Brownlie, “‘Living the same as the White People’: Aboriginal Women and Labour

Native women's own histories suggest that they did not necessarily identify closely with a history of domestic service. For example, trying to get someone in my own family to talk about domestic work in detail was extraordinarily difficult:

Q: When did you get that cleaning job at the old folks home in St. Thomas?

A: Yeah, I don't know, it was off and on. Rod's mother used to stay there, she was a husky outfit.

Q: When did you start working as a domestic for that family?

A: Oh, I'm not sure, we were always working. We wanted the money to buy new clothes.

Q: How did you get the job?

A: Through a friend, in those days, there were tons of jobs for housekeepers.

Q: What was it like living in the house with them?

A: Oh I don't know. Why are you interested in this?

While there is no shortage of stories about Native women and work, they are often told in relation to family responsibilities, other forms of work or activism, scarcity and welfare (or a lack of it), rather than in terms of wage labour. Young women's domestic labour was often counted on by multi-generational families, and it was when family resources were strained that other forms of wage labour like agricultural work, waitressing, secretarial work, department store clerking and domestic service, were sought. Domestic work could be at once, depending on your point of view, evidence of the economic, social and physical impacts of imperialism and colonial policy on Indigenous women, the efforts of Native women in one generation to hold it together for the next, and an entirely

in Southern Ontario in the 1920s and '30s," paper presented at the Labouring Feminism Conference, University of Toronto, Toronto, Ontario, September 2005, Colleen O'Neill, *Working the Navajo Way: Labour and Culture in the Twentieth Century* (Lawrence: University Press of Kansas, 2005), Tressa Berman, *Circle of Goods: Women's Work and Welfare in a Reservation Community* (Albany: State University of New York Press, 2003) and Carol Williams, "Between Doorstep Barter Economy and Industrial Wages: Mobility and Adaptability of Coast Salish Female Labourers in Coastal British Columbia 1858-1890," in Mark B. Spencer and Lucretia Scoufos, eds., *Native Being, Being Native: Identity and Difference, Proceedings of the 5th North American Symposium* (Durant: Southeastern Oklahoma State University, 2005).

ordinary thing for women to do. Such stories do, however, amount to an important body of knowledge about the Indian 1940s, '50s and '60s that contradicts themes of integration and assimilation in standard accounts by revealing the different ways Aboriginal people both faced and made those years.

Work often associated with a social, travelling stage of life, involved a certain degree of choice and was widely taken as a short-term stepping-stone to other forms of work. For example, an overwhelming number of the women Elders interviewed as part of a Sandy Bay (Manitoba) history project mentioned cleaning houses, hotels and hospitals both “in town” and “around the reserve” as part of a longer list of work that included babysitting, digging seneca root, working at fisheries, hoeing sugar beets, haying, threshing, picking, stoking and other farm labour, cutting wood, picking berries, waitressing, selling eggs, weasel and smoked fish and working as a cook.⁸ Domestic work was also associated with “hard times,” particularly for those who were very young, and those whose families could not afford to support them. Lilly Harris, one of the Tobique women who joined together in the mid-1970s to improve local living conditions for women and children, found domestic work in the US by word of mouth starting at the age of fourteen in the 1930s. When she was younger, she picked berries and fiddleheads; after working as a domestic, she got a job hand-sewing moccasins, which was a man’s job, but during the war they hired women to do it. Another Tobique woman, Ida Paul, also had to start working at the age of fourteen. She went to work for an older woman

⁸ *Sandy Bay Anishinabek: The Elders Tell Their Stories*, prepared by George Beaulieu for Sandy Bay Education Foundation, Manitoba, 1996.

who made baskets on the reserve, washing floors, clothes and cleaning her house while staying with different people.⁹

It is important to look at these two forms of domestic labour as they can broaden our understanding of the range of ways that women's domestic labour has been racialized and colonized in Canada. While early feminist Canadian labour history has been helpful in situating domestic work itself as feminized labour, much of it has a way of presenting domestic labour as somehow old-fashioned and housewifely.¹⁰ Newer studies on immigration and migration have helped to delineate how women's household labour was attached not just to ideas about womanhood, but to ideas about womanhood that were shaped also by ideas about race, empire and nation.

Studies of immigration policy and programs are useful in illuminating how the labour of domestic servants was influenced by racial hierarchies and priorities of settlement and the Canadian labour market.¹¹ For example, Adele Perry and Lisa Chilton's work on imperialism and domestics adds to a larger understanding of how white women's labour is put to the service of imperialism and settlement. Chilton's focus is on the British societies that managed female migration from Britain to Canada and Australia and the women who ran them, the "agents of empire." The women attempted to control, indeed "improve," the types of women who were settling in the

⁹ Janet Silman, *Enough is Enough: Aboriginal Women Speak Out* (Toronto: Women's Press, 1987), 19–30.

¹⁰ Genevieve Leslie, "Domestic Service in Canada, 1880–1920," in Janice Acton, Penny Goldsmith and Bonnie Shepard, eds., *Women at Work: Ontario, 1850–1930* (Toronto: Canadian Women's Educational Press, 1974), 71–125 and Alison Prentice et al, eds. *Canadian Women: A History* (Toronto: Harcourt Brace, 1988).

¹¹ See for example, Sedef Arat-Koc, "From 'Mothers of the Nation' to Migrant Workers: Immigration Policies and Domestic Workers in Canadian History," in Veronica Strong-Boag, Mona Gleason and Adele Perry, eds., *Rethinking Canada: The Promise of Women's History* 4th edition (Toronto: Oxford University Press, 2002), 283–298.

colonies and make migration safe and more respectable.¹² Perry demonstrates that domestic servants from Britain were encouraged to immigrate to British Columbia in the nineteenth century. She argues that they were seen as a social panacea to “myriad gendered and racialized dilemmas” in colonial B.C. They would be a stabilizing presence for white men otherwise perceived to be engaged in a footloose, rough, homosocial culture of the backwoods, compelling them to normative standards of heteromascularity, respectability and permanent settlement. Women’s domestic immigration also addressed the local labour market and relieved British fears of overpopulation and a surplus of unmarried women. Additionally, immigration of white women domestics was also meant to tackle the widespread problem of mixed-race marriages, as imperial advocates saw it. As symbols of imperial authority, domestics immigration programs privileged ordinary working white women as they defined the boundary between races. Perry’s work draws together the processes of dispossession and settlement, which she argues were not discrete, but mutually dependent and deeply entwined.¹³

An emphasis on immigration rather than migration, some have argued, has in many ways falsely depicted the workforce as straightforwardly permanent, as anti-race feminist scholarship on citizenship and non-white domestic workers has shown.¹⁴ The uncertainties associated with non-white domestics’ citizenship status can help to

¹² Lisa Chilton, *Agents of Empire: British Female Migration to Canada and Australia, 1860s–1930* (Toronto: University of Toronto Press, 2007).

¹³ Adele Perry, *On the Edge of Empire: Gender, Race, and the Making of British Columbia 1849–1871* (Toronto: University of Toronto Press, 2001), 21, 73 and 145–6.

¹⁴ Nandita Sharma, *Home Economics: Nationalism and the Making of ‘Migrant Workers’ in Canada* (Toronto: University of Toronto Press, 2006), Daiva K. Stasiulis and Abigail B. Bakan, *Negotiating Citizenship: Migrant Women in Canada and the Global System* (New York: Palgrave MacMillan, 2003) and Abigail B. Bakan and Daiva Stasiulis, eds, *Not One of the Family: Foreign Domestic Workers in Canada* (Toronto: University of Toronto Press, 1997).

illuminate similar uncertainties around Native women's labour status as wards of the state. Canadian citizenship was, in many ways, that entity that protected the labour of "real" Canadians, compelled the labour of non-Canadians, and rewarded the labour of "new" ones. For Native people, however, Canadian citizenship, until the 1960s, meant a loss of Indian status, band membership and access to community resources, and could not act as an incentive to work. Certainly it was not an incentive to work only in Canada, but Native people's mobility and other white and non-white migratory labour are rarely analyzed in the same frame because migratory labour is formulated without the possibility of Indigeneity in mind.

Historians of African-American and Latin-American domestic workers have shown how in a domestic's workplace, the home, relations of race, class and gender power are all played out.¹⁵ It is unfortunate that this work, which on this level is about making space in Canada, has developed so completely separately from the literature on making Native space. Agnes Calliste points out in her studies of migration schemes for black domestics how economic demand, political concerns and prevailing ideology worked together to restrict black immigrants in the early twentieth century. Despite a strong continuing demand for domestic service, fuelled in part by factors such as the expansion of wartime industries and the migration of women to cities, the continuing low status of domestic labour meant that anyone with other opportunities could not be attracted to do it. In addition, with a diminishing supply of British domestics, Calliste black domestics were seen as a cheap, intelligent, industrious and devoted alternative. Their "moral character" was the ideological clincher for restrictive policies. Morality

¹⁵ Pierrette Hondagneu-Sotelo, *Domestica: Immigrant Workers Cleaning and Caring in the Shadows of Affluence* (Berkeley: University of California Press, 2001).

was a defining feature of racialized women's domestic labour whether white British, Black Caribbean or Indigenous.¹⁶

White women's feminist organizations, maternal or otherwise, played a fairly marginal role in the placement and surveillance of Native women's domestic labour in either colonial institutions or in private homes and businesses. More central figures involved in domestic labour issues were Native women themselves, DIA officials (mostly men) and individual white women who drew their income from their own or their husband's work in political or government careers.¹⁷ Once a branch of the Department of Mines and Resources, Indian Affairs moved to the Department of Citizenship and Immigration in 1950, suggesting the surveillance at once of the labour and resources of both immigrants and Indigenous people, or what were called in the post-war nationalist jargon, Canadians "New" and "Original."¹⁸ Apart from Industrial School education, there were no distinct policies on Indigenous domestic labour as there were for immigrants, however, the Department of Indian Affairs did distinguish between those Indigenous women "suited" to domestic work in urban versus rural¹⁹ areas and those who

¹⁶ Agnes Calliste, "Canada's Immigration Policy and Domesticity from the Caribbean: The Second Domestic Scheme," *Race, Class, Gender: Bonds and Barriers Socialist Studies* 5 (1989), 133–165. See also Franca Iacovetta, "'Primitive Villagers and Uneducated Girls': Canada Recruits Domesticity from Italy, 1951–2," *Canadian Woman Studies*, 7:4 (Winter 1986), 14–18.

¹⁷ White women's politics did not entirely ignore non-white domestic labour issues pre-1980s; in fact, through individuals, there was quite active involvement. For example, Beatrice Bridgden who ran for CCF in 1936, a United Church worker and followed domestics around Winnipeg in the 1950s and Mrs. Asta Oddson, an Indian Affairs Social Worker who also ran in the '36 election for Social Credit Party, were not involved as a "movement," but Native domestic labour was part of their politics and their work.

¹⁸ Indigenous people were also in this era erroneously called "the oldest Canadians" and "refugees in their own homes."

¹⁹ In the records, "rural" and "local" are often used interchangeably, suggesting that "rural" in fact just meant within or close to an Indian agency.

were not suited to work in domestic service at all. Indian Affairs' surveillance of bank accounts, private or "off-work" time, their relatives and in many cases their relations with employers, distinguishes the experiences of Native domestic workers under their purview, and alongside other federal services, including Indian Health Services, Children's Aid Society and the Indian Education branch, there was a greater potential for longer-term and more profound involvement of the state in the lives of Indigenous women and their children. The price of failing at a domestic post, however, was never as high. Neither the threat of deportation nor the promise of citizenship was effective incentive for Native women to work as domestics under poor conditions. However, with an education compromised in federal Indian schools, few could matriculate. Moreover, for those who could, most public and professional schools were closed to Indian students until well after the 1940s and so there existed few other options for those women who wanted or needed to work. In the next section, I will turn to the department's training grounds for domestics, industrial and boarding schools, and their local employment in the schools, Indian hospitals and for local government officials and missionaries.

Indian Education, Schools, Hospitals and Domestic Labour

Education, in schools devised and controlled by non-Native people, had always been a factor of the civilizing mission in Canada. The main goals of federally controlled Indian education have been to reorient Native children away from Indian communities and culture and towards the state, or in other words to prepare them for Canadian citizenship on certain terms. Education was also central to the dispossession of Indigenous lands, languages and cultures. In the late nineteenth century, a particularly oppressive system of

Indian residential schools developed through the joint cooperation of the Department of Indian Affairs and the Christian missionary churches in Canada. The *Indian Act* gave the Minister of Indian Affairs discretionary powers to establish, maintain and operate schools and to compel school attendance for Indian children between the ages of 6 or 7 and 16. By 1948, Indian boarding schools numbered 72 and incarcerated 68 percent of the Indian school population. Especially by the 1940s, and arguably much earlier than that, the schools were widely known to be scandalously noxious and abusive.²⁰

From the 1880s until well after 1951, when the half-day system was officially abandoned in federal Indian education policy, it was authorized that manual labour and academic study should share equal space in the curriculum of Indian residential schools. A strict division of labour along gender lines reflected broader ideologies of gender in Canadian society in which “suitable tasks” were supposedly inherited according to gender. Ideally, heavy, outdoor work was reserved for men, whereas women were confined to a private, domestic sphere.²¹ Thus, girls’ education in industrial schools included housework, mending, sewing, sweeping, cooking, washing and ironing, dairying, canning, gardening, hygiene, and home nursing.

²⁰ John Milloy, *A National Crime: The Canadian Government and the Residential School System – 1879–1986* (Winnipeg: University of Manitoba Press, 1999), J.R. Miller, *Shingwauk’s Vision: A History of Native Residential Schools* (Toronto: University of Toronto Press, 1997), Brian Titley, “Indian Industrial Schools in Western Canada,” in Nancy M. Sheehan, J. Donald Wilson and David C. Jones, eds., *Schools in the West – Essays in Canadian Educational History* (Calgary, Detselig Enterprises Limited, 1986), 133–153, Elizabeth Furniss, *Victims of Benevolence: The Dark Legacy of the Williams Lake Indian Residential School* (Vancouver: Arsenal Pulp Press, 1995), Agnes Grant, *No End of Grief: Indian Residential Schools in Canada* (Toronto: Pemmican Publications Inc., 1996) and Isabelle Knockwood, *Out of the Depths: The Experiences of Mi’kmaq Children at the Indian Residential School of Schubunacadie, Nova Scotia* (Lockeport, Nova Scotia: Roseway Publishing, 1992).

²¹ Veronica Strong-Boag, *The New Day Recalled: Lives of Girls and Women in English Canada, 1919–1939* (Toronto: Copp Clark Pitman Ltd., 1993).

Domestic science became a fundamental element of girls training throughout North America in the late nineteenth and early twentieth centuries and was sustained in part by a post-war cult of domesticity. It was not unusual for industrial schools in general to induce labour of their incarcerated charges; however, this training bore specific meaning in the philosophy and direction of education for Indian girls. First, it was supposed to prepare them for their own (reformed) roles as mothers and wives; the schools targeted Indian cultures by replacing the children's own existing homes with the civilizing sphere of the school. Second, Indian residential schools were fully dependent upon the manual labour of Indian students. Third, it sought to prepare them to enter the labour market, and socio-economic order as domestic servants when they left school.²² Work on Indigenous education and female domestics in Australia illustrates how their federal schools for Indigenous people also aimed to create an "underclass of obedient underpaid labourers, both on reserves and missions and in private employment," that education was "utilitarian rather than intellectual," and that Indigenous students were "schooled for lifetimes of drudgery."²³

There existed a continuum of different kinds of labour Aboriginal students and graduates engaged in which including unpaid, underpaid as well as paid labour. At the very basic level, domestic training in the schools was unwaged (and unfree) student labour. As the institutions themselves, often attached to farms and gardens, were meant

²² Wallace Adams, *Education for Extinction: American Indians and the Boarding School Experience 1875–1928* (Lawrence: University Press of Kansas, 1995) and Jean Barman, "Separate and Unequal: Indian and White Girls at All Hallows School, 1884–1920," in Jean Barman, Neil Sutherland and J. Donald Wilson, eds., *Children, Teachers and Schools in the History of British Columbia* (Calgary: Detselig Enterprises, 1995), 343.

²³ Joanne Scott and Raymond Evans, "The Moulding of Menials: The Making of the Aboriginal Female Domestic Servant in Early Twentieth Century Queensland," *Hecate* 22:1 (1996), 139–57.

to be lessons in self-sufficiency, the system rested fully on student labour, rather than sound budgeting and planning.²⁴ In light of the deplorable conditions of the schools, the lesson must have been a hollow one indeed. The schools in design, hygiene, heating, ventilation, wiring, sewage, and dietary provisions failed to comply with health regulations and were in a state of decay that had well-documented effects on the health of the students. Moreover, the half-day system contributed directly to the failure of the schools in terms of education; the majority of students did not complete an elementary education.²⁵ Arguably, Native children's labour was one of the central reasons for forcing them to attend the schools until they were sixteen, even though most were only elementary schools. One educator's observation of the schools as "workhouses" was probably fairly representative.²⁶

On the other side of this labour training was significant local demand for the labour of Native people. Older students engaged in more formal waged labour at colonial institutions, including residential schools, hospitals, nursing stations, mission stations and, indeed, many of the private homes of missionaries, teachers, principals, nurses and doctors. Native author Jane Willis talks about this type of work in her 1973 memoir *Geniesh: An Indian Girlhood*. One day at the St. Philip's Anglican Residential School (in Fort George, Quebec) in the 1950s, Reverend Montgomery, the principal of the school, approached her and her friend: "You girls will be graduating from this school in June," he said. "I called you in here to discuss your future. ... Legally you're supposed

²⁴ Milloy, *A National Crime*, 169.

²⁵ J. Barman, Y. Hébert and D. McCaskill, eds., *Indian Education in Canada*, Volume 1: *The Legacy* (Vancouver: University of British Columbia Press, 1986) and Verna J. Kirkness, *Evaluation Report: Education of Indians in Federal and Provincial Schools in Manitoba* (Ottawa: Department of Indian Affairs and Northern Development, 1978), 176.

²⁶ Milloy, *A National Crime*, 171.

to stay in school until you're sixteen. So what I had in mind was for both of you to live and work here at the school. Violet, you could work in the kitchen, and, who knows, maybe someday you could work yourself up to assistant cook. Janie, we could put you in the laundry, and maybe someday you'd be in charge. But since you cannot legally quit school for another two years, you'll have to continue with your lessons ... That way you can earn money while you're learning. We'll start you off at five dollars a week." For Janie, it was a "tempting offer, but high school was more tempting." While she waited until arrangements were made for her to leave for high school, she focused on schoolwork, working part-time as a babysitter for the Montgomery's.²⁷

The strong connections between Indian schooling and servitude have yet to be fully examined. Historian Jim Miller talks about apprenticeship forms existing in many schools from the 1880s to the 1940s in relation to casual employment, and the school week and the school year effectively facilitated weekend as well as summer local employment. Miller argues that for the girls, this was "merely a continuation of their employment as domestic workers in the schools, or in some cases as the private maids and helpers of principals' wives." In the eyes of the DIA, the advantages of the system included "acquiring increased proficiency in the English language ... [and] the habits and ways of thought pertaining to the whites. Moreover, it kept young women isolated from their own people at an age when marriage was a possibility." Miller also points out the department's ambiguous views of apprenticeship – it raised the problem of controlling the after-school time and spending money of Native students.²⁸ As I will show later, this

²⁷ Jane Willis, *Geniesh: An Indian Girlhood* (Toronto: New Press, 1973), 105.

²⁸ Miller, *Shingwauk's Vision*, 255–7.

issue was to continue to bother the department when it came to Indian women doing work outside the purview of the schools.

As Miller points out, student employment in the private homes of principals and other school employees led to their placement as domestic servants once they left the schools. H.M. Jones explained in 1955, “the older girls” at the residential schools “take turns working in the principal’s residence and in the homes of other school employees.” He boasted that “as a direct result of this training, a number of girls have been successfully placed in non-Indian homes as domestics.”²⁹ It appears that the domestic labour of students was indeed assumed to be part and parcel of the privileges owed to principals and their wives. In *An Indian Girlhood*, Janie describes working as a “full-time maid” for the wife of the principal at St. Phillip’s on one of her return visits home from Shingwauk. She describes in great detail her workday, which started at 7:30 am, when the children got up, and went until late at night, when she was expected to be on-call for babysitting without notice and without extra pay. It included feeding, washing and dressing the children and taking them out for a walk, putting them down for a nap or sending them out to play while she dusted, swept, mopped, laundered, ironed, polished silver, washed windows and washed dishes. All the while, Mrs. Montgomery napped, sipped tea, wrote letters, rested, watched her or complained “Oh dear! We have so much work to do today.” Janie worked six days a week and writes “[I had] the feeling that the Montgomerys thought they owned me just because they paid me five dollars a week.” After four weeks, she had had enough and one day refused to go to work. The Reverend

²⁹ Library and Archives Canada, Record Group 10 Indian Affairs (hereafter RG 10), Volume 8414, File 1/21-1 pt. 3, Correspondence Regarding the Placement of Indian Labour 1955–1956, “The Deputy Minister” Ottawa, 27 June, 1955.

went straight to her house and yelled, “Who do you think you are anyway? ... Do you think you’re any better than the other Indians just because you’ve had a few years of high school? Well, you aren’t.” Turning to Janie’s mother, he yelled, “That’s gratitude for you! I offer her a job and what does she do? She thinks she’s too good for it. I’ve heard of ungrateful people before, but she beats all.” Then, he turned to Janie. “A lot of girls on this island would be thrilled to have your job,” he continued. “If this is an example of what a higher education does for you, then I’m all for keeping Indians ignorant.”³⁰

Indian hospitals, clinics and nursing stations and the doctors and nurses who ran them were also dependent on the domestic labour of Aboriginal women and men. When it comes to post-war work in Indian hospitals, it is important to think of domestic labour in the Indian Health Service as the federal officials did – as in fact skilled work done by qualified individuals. Remarkably, the earlier Indian Health Service relied almost entirely on part-time, unpaid or poorly paid female domestic labour. Very few full-time nurses, or doctors for the matter, were employed by the branch, and those who were full-time mostly worked at the Indian hospitals. Outside of those institutions, there were travelling nurses in this system by the 1920s, however they were few and far between. Field matrons and dispensers, a largely unpaid group of female workers, were appointed where the population was not seen to warrant full-time medical personnel. Field matrons were to provide instruction and advice in housekeeping and, like dispensers, provide drugs, dressings and simple remedies. The on-the-ground Indian health workforce was therefore for many years an ad hoc network of local, voluntary, philanthropic and unqualified white women supplementing the trained services of non-local white nurses.

³⁰ Willis, *Geniesh*, 177–81.

Maids and handymen for nurses were often paid out of nurses' own salaries, in kind, or by HBC credit.³¹ Religious hospitals operated along the same lines. For example, the domestic laundry workforce at Dynevor Anglican hospital near Selkirk, Manitoba, was "as a rule" all Native by the 1920s. All Saint's Hospital in 1931 was staffed by the Church of England and employed: "three grad nurses, one house matron, a native ward-maid and an outside handyman."³² In the suggestions of all health professionals from the earliest service, it is clear that there was a perceived role for female Aboriginal health care providers in First Nations communities. That role was assistant, helper and housekeeper.

When IHS modernized, the terms "ward aide" and "nurses's aide" and "hospital maid" began to replace the more generalized language of "housemaid and "housekeeper." Aides and maids performed housekeeping, messenger and cleaning duties, as well as carrying and collecting trays, making beds, cleaning rooms and caring for and visiting

³¹ For example, in 1925 at Oxford House and God's Lake, the doctor suggested that a nurse be stationed at each of the reserves, "the nurses would need an Indian girl each, as companion and interpreter. ... I should place the nurses' salaries at \$1500 per year, with an allowance for freight and \$200 for the Indian girl, a total of perhaps \$2000 for each nurse." RG 29, Volume 2912, File 851-1-A501 pt. 1, Indian and Northern Health Services – Manitoba Regional Office – Winnipeg, Man 1914/10-1940/12, "Health and Disease at the Norway House Indian Agency," 26 April, 1925. Cowall Farrell and Alivaktuk find that Paanirtuuq hospital workers' salaries were paid by nurses through a "barter and trade system." Emily Cowall Farrell and Meeka Alivaktuk, "The Work We Have Done: Relationship, Investment and Contribution The Inuit Workers at St. Luke's Hospital Pannirtuuq 1930-1972" unpublished paper, p. 11-12. The maid at Island Lake Nursing Station in 1951 was paid by order of credit on the HBC. Library and Archives Canada, Record Group 29 National Health and Welfare (hereafter RG 29), Volume 2782, File 823-1-A501, Nursing and Dispensing Arrangements, Manitoba Regional Headquarters, Winnipeg, Man, 1906/09-1052/11, letter to the Director IHS from W.J. Wood, 25 June, 1951.

³² Archives of the Diocese of Rupertsland, Rupert's Land Diocesan Board of the Women's Auxiliary to the Missionary Society of the Church of England in Canada, *Annual Reports*, 1918, 1924, 1925, and 1931.

patients. Ann Callahan, who worked as a nurse's aide at Fort Qu'Appelle Sanatorium, explains that she also took patients for walks – treatment for TB at the time, – and visited with them.³³ Eleanor Olson worked as a ward aide at the Norway House hospital on weekends while she was in school. It was this work that first got her interested in becoming a nurse. She remembers following and watching the other nurses working and asking them lots of questions about how to become a nurse. She later studied to be an Licensed Practical Nurse at St. Boniface Hospital and worked at Fisher River Hospital, Hodgson Hospital and as a Community Health Nurse in Peguis, Manitoba.³⁴

Because of the specialized nature of ward aide and nurses aide training on the one hand and a limited access to levels of education necessary for entering specialized programs, there was a debate between Indian Health Services and Indian Affairs over which federal department was responsible for training this workforce. Indian hospitals and doctors working for the Medical Services Branch often devised “modified” training programs for hospital staff, whereby hospital maids would advance to ward aides or nurse's aides after a period of training.³⁵ These courses taught cleanliness, punctuality, efficiency and discipline, as well as bed-making, room-cleaning, preparation of foods and trays and care of patients. One of the various uncertified nurse's aide training programs offered by hospital staff in the Northwest Territories in the 1940s is described by

³³ Ann Callahan, Interview with Author, 26 March, 2006.

³⁴ Eleanor Olson, Interview with Author, 14 July, 2006.

³⁵ Other apprenticeship and in-service courses were undertaken at Clearwater Sanatorium and elsewhere, and they were promoted at other hospitals like Lytton, Tranquille Sanatorium and perhaps Kamloops Hospital as well. RG 10, Volume 8767, File 1/25-7-5, pt. 1, Superintendent of Education Training of Indians as Nurses and Nurses' Helpers, by C.A.F. Clark, Educational Survey Officer, 9 August, 1949.

historian Laurie Meijer Drees.³⁶ This program grew out of informal training practices in the area and engaged mission hospitals at Fort Smith, Aklavik and Fort Simpson and the Resolution Indian Residential School. While the training provided for this program was much like Practical Nurse and Nurse Assistant training, it appears that the scheme stands apart for its goal to improve the individual lives of the nurses-in-training and their families, rather than promote the more widespread nursing ethic of selflessly serving others.

In response to the 1955 memorandum regarding “Training Farm Labourers and Domestic Workers,” Superintendent of Education R.F. Davey noted that the “Indian Health Services have also been most helpful in giving training on the job at most of their hospitals.”³⁷ In 1954, P.E. Moore, Director of Indian Health Services, affirmed his department’s policy for the employment of Indian labour: “wherever possible, Indians are given the preference” although, he explained further, “occasionally ... a nurse who is a newcomer to the district will hire a non-Indian maid or housekeeper during the time she is becoming acquainted with Indians of the community in which she serves, and the employment situation among them.” The tendency of hiring non-Native domestics for nurses at Point Bleue reflected larger and longer-standing antagonisms between the branches of the Indian Health Services and Indian Affairs. While Indian Affairs wanted all federal services to give preference to Native labour, the Indian Health Service seemed reluctant to follow through, which, in the end, reflected poorly on the DIA. DIA

³⁶ Laurie Meijer Drees, “Training Aboriginal Nurses: The Indian Health Service in Northwestern Canada, 1939–1975,” paper delivered by special invitation to the Hannah Conference in the History of Medicine, University of Ottawa, June 2005.

³⁷ RG 10, Volume 8414, File 1/21-1 pt. 3, Correspondence Regarding the Placement of Indian Labour 1955-1956, Memorandum to the Director Re: Training Farm Labourers and Domestic Workers, R. F. Davey, Superintendent of Education, 17 June, 1955.

Regional Supervisor Jules D' Astous stated: "It serves little purpose to have meetings with Indians, encourage them to get better education, tell them that we are badly in need of nurses, nurse's aides, school teachers, etc., when in practice we find that they cannot even qualify for housekeeping duties."³⁸

It is significant that residential schools were seen as the most readily available recruitment grounds for uncertified nurse's aide courses.³⁹ Residential schools created a significant pool from which to draw institutional labour, and it is worthwhile thinking about the involvement of the state in the procurement of its own workforce. In his investigation of southern Alberta's sugar beet industry, Ron Laliberte argues that the DIA's involvement in the recruiting of an Indian labour force from northern reserves in Alberta and Saskatchewan relieved that industry's labour shortage. It resulted in the creation of a working class of Aboriginal people in ways that prevented the disruption of labour and education practices among Aboriginal people, and a larger class revolution.⁴⁰ Within the federal employment situation, this was fairly unlikely to happen, however, it is probably worth further investigation into the employment practices of both the Department of Indian Affairs and Health Canada, as these workforces have historically

³⁸ RG 10, Volume 8413, File 1/21-1, pt. 1, Correspondence Regarding the Placement of Indian Labour 1933-1954, letter to Colonel Jones, Director, Indian Affairs Branch from J. D' Astoust, Regional Supervisor of Indian Agencies, Re: Nursing Station Personnel, Pointe Bleue Indian Agency, 19 January 1954, letter to P.E. Moore from H.M. Jones, Ottawa, 22 January 1954 and letter to Colonel Jones, from P.E. Moore, 5 February 1954.

³⁹ RG 10, Volume 8767, File 1/25-7-5, pt. 1, letter to Departmental Medical Officers of the North West Territories from H.W. McGill, M.D., Director of Indian Affairs, Ottawa, 8 January 1942.

⁴⁰ Ron Laliberte, "The 'Grab-a-Hoe' Indians: The Canadian State and the Procurement of Aboriginal Labour for the Southern Alberta Sugar Beet Industry," *Prairie Forum* 31:2 (Fall, 2006), 305-324 and Ron Laliberte and Vic Satzewich, "Native Migrant Labour in the Southern Alberta Sugar-beet Industry: Coercion and Paternalism in the Recruitment of Labour," *Canadian Review of Sociology and Anthropology* 38:1 (1999), 65-86.

been so dissatisfied. The state is culpable, however, for lower-paid employment of Native people, as it was in some ways invested in low Indian education standards. Moreover, the removal of children from their homes for school gave the state a particular advantage in terms of a pool of labour to draw upon, even more so when students at the schools were orphans or from impoverished families and communities that could not readily support them.

For many Native women who worked in various capacities at hospitals and nursing stations throughout the country, this work was arranged by their school principals and teachers. For example, Elders at Sandy Bay, Manitoba, remember that some of the girls were taken after they finished school to work at St. Boniface Hospital in Winnipeg. One Elder worked in the annex as a nurse's aide and also in the kitchen with two of her friends. She recalls that "when some of the girls finished school, the Father came and got us to work for the farmers in Lavinia. ... Other girls were also taken to St. Boniface to go and work. I worked in the annex as a Nurse's Aide, I emptied bed pans and made beds every morning. I also worked in the kitchen..." Another Elder remembers being taken to St. Boniface by the priest to work at the Sanatorium when she left school at the age of 18.⁴¹ In some cases, employment at a hospital was actually an expectation after attending the school. We are reminded here of the myriad ways domestic labour gets gendered and racialized and that, for many young Aboriginal adults too, domestic work was an important source of income.

By the 1960s, Indian Affairs was also involved in "on-the-job training" of Indian labour at residential schools. In 1961, H.M. Jones, Director of Indian Affairs, reported

⁴¹ *The Elders Tell Their Stories*, n.p.

that a recent survey indicated that there were “approximately 300 Indian employees at residential schools of a total staff of approximately 1200. However, most of these employees are engaged as unskilled labourers.” These statistics inspired a program of on-the-job training in the Indian residential schools “designed primarily to prepare Indians for employment in the schools.” Fields of training, including “supervision, cooking, stationary engineering and maintenance,” would be offered to trainees, who, housed in regular staff quarters or other facilities, were paid a salary of about \$125 per month out of “educational funds.” The length of training was commensurate with skill level, but, it was suggested, was not to exceed the regular school year. After this time, “every effort” was to be made at Headquarters “in negotiations with the religious denominations responsible for the operation of the Government-owned Indian Residential Schools to accept such trainees for full-time employment when they have received the necessary qualifications.” Regional placement and education officers would be responsible for insuring that “provincial requirements are met to obtain proper qualifications and rates of pay.”⁴²

In Manitoba, six schools participated in this program in 1961: Assiniboia, Mackay, Birtle, Brandon, Fort Alexander and Portage La Prairie. Assiniboia was chosen because it was accessible to the Manitoba Technical Institute and vocational schools that provided low-cost, non-credit courses for adults. Birtle, the only school still operating a farm, could provide training in grading, packaging and storage of meat, milk products,

⁴² RG 10, Volume 8767, File 1/25-7, pt. 8, General Correspondence Regarding Vocational Training of Indians Throughout Canada 1961-1963, Circular No. 59 re: On-The-Job Training to Indian Commissioner for B.C., Regional Supervisors from H.M. Jones, Director, 20 March 1961 and letter to Regional Supervisor, Alberta from R.F. Battle, Chief, Economic Development Division, 23 June 1961.

poultry products and vegetables. Brandon was chosen because it could provide on-the-job training for cooks and cooks' assistants. MacKay, the largest residential school in the region, employed "competent engineers ... and experienced caretakers" who could provide on-the job instruction for maintenance workers. Fort Alexander was chosen because, located on a large reserve, it could select trainees locally, and Portage because it had the necessary staff to train supervisors.⁴³ A progress report of the trainees in this program counted one kitchen and laundry helper, trained for four months, who returned home and then went on to enter Grace Hospital in Winnipeg to train as a nurse's aide; and two full-time laundry, dining room and cook staff who had undergone training for ten months (two months longer than it currently takes to be a city police officer).⁴⁴

By the early 1960s – and for various reasons including the disgusting physical state of the schools, a new vision of educating parents alongside children and a belief that integrated schooling would accelerate the assimilative process – the Department of Indian Affairs and its resistant partners, the churches, had already begun the process of closing the residential schools system. They were replaced with reserve-based day schools or integrated provincial schools. The existing boarding schools became a "supplementary service" for those who could not commute by bus to federal day schools or provincial

⁴³ RG 10, Volume 8767, File 1/25-7, pt. 8, letter to Chief, Education Division, Indian Affairs Branch, from Regional Supervisor, Manitoba, 29 Sept 1961 and Memorandum to Indian Affairs Branch from Winnipeg Regional Office Re: On the Job Training Program by A.G. Leslie, 7 Nov 1961.

⁴⁴ RG 10, Volume 8767, File 1/25-7, pt. 8, Progress Report "On the job" trainees Indian residential schools.

schools, and they were resorted to only after “all other avenues, such as foster homes, day school attendance and improved housing have been explored.”⁴⁵

Residential schools also turned into hostels for high school students who came from areas where no facilities existed. When hostels reached capacity, students were also placed in private homes while they attended integrated high schools. This boarding program was an economical alternative to building schools, and Milloy finds that by 1969 there were 4,000 students in the boarding program compared to 7,704 students in residential schools.⁴⁶ One example of this situation was Shingwauk, which, through an agreement made in the mid-1950s with Sault Ste. Marie schools, became a hostel for high school and grammar school students from Sioux Lookout and Moose Fort schools. When it reached capacity, Native students were placed in private homes locally or transferred to homes in North Bay, where they continued high school.

Janie was one of these students and her experience described in *An Indian Girlhood* is instructive of the ways in which Indian education dovetailed with domestic labour to create possibilities for student labour even as residential schools were in the process of closing. Struggling with the very unsatisfactory residential arrangements at Shingwauk and threatening to drop out, Janie was presented another option: to go to a public high school and be placed in a private home. She agreed, because she desperately wanted to leave, and moved to North Bay. Intuitively, after arriving at her new lodging, she writes, “I sensed that my new life with the stern-faced old woman before me was going to be no improvement over the last ten and a half years ... Gray hair in pincurls,

⁴⁵ “Long Range Planning and Financial Forecasting” Education Division, Indian Affairs Branch, December 1966, quoted in Kirkness, *Evaluation Report*, 181.

⁴⁶ Milloy, *A National Crime*, 206.

wrinkles dripping with face cream, massive body wrapped in a boldly flowered robe, upper lip curled disdainfully, she stood glowering at me. ... My “new mother”, Mrs. Fulton, was in her sixties ... I learned very quickly that she had taken me in for purely selfish reasons. She wanted a live-in maid. Before the second week was out, she had me doing everything but the cooking and changing her bed.”⁴⁷

It is significant that even in a period of integration, domestic labour followed through as a mainstay of Indian education. The rejection of the 1969 White Paper, the fullest expression of Canada’s policy of termination by integration, highlighted the injustice of this policy with regard to Indian rights and federal responsibilities. The live-in student-domestic situation reveals two other elements of the overarching integration philosophy. First, integration as not simply a matter of race, but would only ever follow along class lines and would only work if it served “real” Canadians and the state. Second, Indian policy for integration was no longer considered the exclusive business of Indian Affairs and the missionary churches, but all Canadians.

DIA Involvement in the Placement of Indian Live-In Domestic

The historical literature on domestic service has gone through shifts between a focus on women’s work, to the involvement of the women’s movement, to studies of the imbricated relations of class, gender and race, to migration and citizenship. Native domestics, however, have been rarely acknowledged in these discussions, or if so, only in brief references to other works of minimal contribution, which pointed to the trend towards domestic labour without actually inquiring about the labour itself, the employers

⁴⁷ Willis, *Geniesh*, 194–197.

or the working conditions. In a way, while trying to carve a space for their own history, women's historians in the 1980s wrote onto Native women's history that same absence that they themselves felt unreasonable. Labour historians have done the same thing.

Understandably, relying on studies of Native labour would have revealed very little information about Native women. Up to the 1980s, social scientists were interested in Indian agricultural, logging, mining, hunting and fishing work pursued primarily by men, and rarely included statistics about wages, working conditions and employment patterns of Native women. Take a look at the Hawthorn Report, for example. Indeed, only feminist anthropologists and ethno-historians have made concerted attempts to investigate the lives of Native women, but in those versions, Native women often appear as "roles" not women; as static, remote, ahistorical economic figures with neither a social nor a political history. Moving towards studies of reforms in Indian education, welfare and community development, the newer focus on the need for professional training for self-determination, yet again has left out a large part of the working population and maintained a focus on men.

We are told by Canadian labour historians and Canadian women's historians, for example, that Native women were not recruited on a large scale for domestic service as if that is the end of the story.⁴⁸ However, the DIA played a significant role in both recruiting and inducing Native women's labour in these years. It also dealt in advertising domestic service, in its administration and in contracting and regulating Indian labour. In this section, I will discuss demand for and participation in domestic labour in the 1940s.

⁴⁸ Mary Kinnear, *A Female Economy: Women's Work in a Prairie Province 1870–1970* (Montreal: McGill Queen's University Press, 1998), 110.

At a structural level, it is important to study Native women's wage labour in domestic service because it was so highly in demand. This is a particularly unclear side of the labour equation in the historical literature on domestic service. By the early 1940s, reports of Indian agents across Canada confirmed this. Agents reported "requests" for Indian women's labour both from "outsiders" and "locally" and in many cases recorded that the demand far exceeded the number capable of undertaking the work. They recorded that "Indian girls" had an excellent reputation as workers and were working for sympathetic employers for good wages – at File Hills, for example for around \$25 per month with board.⁴⁹ The demand for domestic labour was so high, in fact, that some agents felt they should regulate Native women's labour participation. M. Christianson, General Superintendent of Indian Agencies, outlined this tension in 1942, worrying that of the "great many of our Indian girls" responding to the "considerable demand for domestic help as well as help in cafes, hotels, etc" in Regina, "at least 95 %" had "failed

⁴⁹ RG 10, Volume 3199, File 504 178-5, Headquarters Correspondence Concerning the Employment of Indian Girls as Domestic Servants 1941-1945, Report on Shubenacadie Indian Agency for the Month of May 1943, H.C. Rice, Indian Agent. Rice unfortunately finishes this sentiment with "which appears to me a good argument against the suggestion that the inertia, characteristic of the male Indian results from a dietary deficiency." Report for the Month of February 1943, St. Mary's Reserve, York Co., N.B. by Indian Agent Edward J. Whalen, 6 March 1943; Report for the Month of March 1944, Edward J. Whalen Indian Agent; Report of Rama Indian Agency for the Month of March 1944, H. J. Featherston, Indian Agent; Personal Report for the Month of October, 1941 Sarnia Ontario, November 6, 1941, Geo. W. Down, Indian Agent; Report on Sturgeon Falls Agency for the Month of November, 1943, J.A. Marleau, Indian Agent; Report for the Month of February 1943, Chapleau Ontario, 1 March 1943, F. Matters Indian Agent; Report on Clandeboye Indian Agency for the Month of May 1944, E. McPherson, Indian Agent; Report on File Hills Indian Agency for the Month of April 1944, Frank Booth, Indian Agent; Report on Touchwood Indian Agency for October 1943, R.S. Davis; Report on Touchwood Indian Agency for the Month of April 1944, R.S. Davis, Indian Agent; Report on Duck Lake Agency for the Month of December 1943, S.H. Simpson, Indian Agent; Letter to Mr. Henry, National Selective Service Mobilization Section, Ottawa, from C. W. Jackson, Chief Executive Assistant, Department of Mines and Resources, 20 October 1943.

both from the point of taking their work seriously enough to remain with it, as well as in their social behaviour, resulting in dismissal from their work.” Christianson argued that “our endeavour should be to keep Indian girls away from larger populated centres where they are an easy prey” and instead “endeavour to find good homes for such Indian girls where they can work on farms or in small towns adjacent to the reserves as domestics. In this way we could reduce at least to a minimum the immoral life some of our Indian girls are led into in larger communities, in many cases through no fault of their own.” He suggested that the agents work with the missionaries, and the parents of the girls, to dissuade them from working in the city.⁵⁰ These reports demonstrate a widespread demand for Indian labour, full participation in domestic wage labour by Native women, and the DIA’s interest in their unblemished success in this form of work on a permanent basis.

The Ottawa Experiment

In 1943, a residential school principal wrote to Mr. Morris of the Welfare Division of the Department of Indian Affairs responding to a request for five girls to be placed in domestic work in Ottawa.

I have persuaded three young ladies to go. I told them that I would write to you and that I was sure you had positions for them. They are Indian girls of course They are of excellent moral character and quite trust-worthy. Their reputations are of the best. And I feel that it will certainly be for their best interests if they can work for a time in some good homes. They all went to the 8th Grade in school – speak English quite well, and are in good health. They would prefer Catholic homes if possible Do you think you could place them? It

⁵⁰ RG 10, Volume 3199, File 504 178-5, letter to All Agents, from M. Christianson, General Superintendent of Indian Agencies, Regina, 3 December 1942.

would, I am sure, be for the welfare of our Indian charges. They would prefer private homes to work in.”⁵¹

R.A. Hoey, Superintendent of Welfare and Training, agreed to arrange for the purchase of clothing so that the “girls” would be “made presentable” and enclosed three transportation warrants for rail travel to Ottawa, where they were to report to the Indian Affairs office on arrival. He added, “it is our intention to have them medically examined. This is purely routine. The girls need not worry about it. The Department will make all the necessary arrangements. It might be well for you to inform them of our intention so that they will understand.” The sisters were placed in three homes close together in the wealthy Ottawa borough of Rockcliffe.⁵²

In the early to mid-1940s, the DIA ran what it called an “experiment” in the placement of Native women in domestic labour in Ottawa. The program seems to have been initiated by the Superintendent of Welfare and Training R.A. Hoey and Mr. Morris, of the Welfare Division, and run in connection with the Spanish, Shingwauk and Chapleau residential schools, each located around middle northern Ontario north of the Great Lakes (approximately 600 kilometres from Ottawa). The schools were all manual training institutions with an enrolment of mostly (but not always) local children or orphans from elsewhere in the province. Several Agents were also involved, either through their connection to the students or the Indian agency associated with the schools.⁵³ At Indian Affairs Headquarters, the head of the Welfare Division, and the

⁵¹ RG 10, Volume 3199, File 504, 178-5, letter to J.E. Morris, Welfare Division, from C.A. Primeau, Principal, Indian Residential School, Spanish Ontario, 1 February 1943.

⁵² RG 10, Volume 3199, File 504 178-5, letter to C.A. Primeau from R.A. Hoey, Superintendent of Welfare and Training, 5 February 1943.

⁵³ The connection to Shingwauk and Spanish probably developed out of two causes: first, southern Ontario, many ex-students could get work and better-paid work closer to home;

Superintendent of Welfare and Training inquired among agents and principals regarding students who were about to be discharged from the schools. They also kept “waiting lists” of potential employers, kept in touch with the employers and made decisions in problem cases.⁵⁴ Agents and Principals interviewed and evaluated potential candidates, made travel arrangements, spent allocated funds for transportation and clothing and, in many cases, cooperated with Hoey in dealing with problems.

The domestics in the program came from all kinds of situations. Sometimes students requested placement. Some already had experience working for wages in the residential schools and Indian hospitals. They had various levels of education and a few had grade eight, but all had limited access to more. Most were between the ages of 15 and 22, but a few were in their late 20s and 30s. Importantly, they all shared a common experience of institutionalized federal Indian schooling, English language skills and good health. This was the generation of Indians so heralded by Indian residential schools as those who could communicate in both worlds and who would “raise their people.”

The Department of Indian Affairs had a certain way of inscribing manual labour onto the bodies of domestics: they were “strong,” “stocky” and prepared for the types of heavy physical labour that their employers could or would not do. Descriptions of their physical health were sometimes separately guaranteed by a medical exam or an x-ray.⁵⁵

and second, there seems to be a personal connection formed at these schools between the principals, the agents and individuals in Ottawa like Senator Cairine Wilson.

⁵⁴ These lists included over thirty names in 1943. RG 10, Volume 3199, File 504 178-5, letter to M.S. Blanchard, Principal The Mackay School, Montreal, from R.A. Hoey, 10 September 1942.

⁵⁵ This was probably less indicative of contemporary concerns about venereal disease than it was about the spread of tuberculosis from Native people to whites, but at the time, both shared the status of being highly associated with those marginalized by class and race.

Candidates for the program were distinguished intellectually and by their work ethic and habits. It was ultimately the department's decision whether and where a domestic could work, and it did so by distinguishing "types" suited to urban as opposed to local employment – it favoured local employment for those who needed "more supervision."⁵⁶

Unfortunately, the only information I could find about this domestics placement program comes from a block of RG 10 material that includes only headquarters correspondence, little of which was by the employers or the domestics themselves. By my best estimate, the record holds around seventy cases of requests and placement attempts for which there exists varying degrees of detail on fifty. Still, these records can relate a little information about the ways the department engaged in the domestic labour of Native women in these years and to help draw out some of the broad themes about this type of work: family involvement; clothing and transportation; working conditions; the homes of the domestics' employers; ward status and wage labour; and sexuality, reputation and regulation.

Before retaining Aboriginal domestics in this program, the DIA, through agents or principals, most often consulted their family members, who often objected on the grounds that they were needed at home to care for relatives including widowed parents and older people, that their absence would cause hardship to their family or that they had better educational or work opportunities elsewhere.⁵⁷ This reminds us that Native women

⁵⁶ RG 10, Volume 3199, File 504 178-5, letter to J.W. Daley, Indian Agent from R.A. Hoey, 14 June 1944.

⁵⁷ RG 10 Volume 3199, File 504 178-5, letter to R.A. Hoey from Principal Laferriere, Girls School, Spanish, Ontario, 31 June 1943. In one case, a great-grandfather recommended his granddaughters to the agents, wanting them to have the "opportunity" to be domestics. Still, the agent needed to convince the parents to let them go. RG 10,

engaged in wage labour not as individuals, but as members of families and communities. In cases where family members were not contacted, the DIA made decisions on behalf of the candidate. Also, if the opinion was that “the parents of these girls are not responsible and will not provide a good home for them,” then agents and principals followed through by encouraging “suitable” candidates to accept domestic employment without their permission.⁵⁸ In letters, the Department called these justifications “family reasons.” In at least two situations, there was recognition that a bad call was made in this regard and that the girls should have stayed with their families.⁵⁹ Religion also played an important role in placement – for example, Catholic domestics were preferably to be placed in Catholic homes and Protestant domestics in Protestant homes.

The program included the hallmark of Indian labour programs: transportation and a clothing allowance. This was provided on the condition that the domestic agreed to work for a minimum of six months.⁶⁰ Domestics, armed with letters of identification, came by rail and were met either at the station by officers from Indian Affairs or reported to the Traveller’s Aid desk. Taxis were sometimes arranged to take the domestics to the

Volume 3199, File 504 178-5, letter to C.R. Johnston, Indian Agent, Manitowaning, from R.A. Hoey, 28 June 28 1943.

⁵⁸ RG 10, Volume 3199, File 504 178-5, letter to F. Matters, Indian Agent, Chapleau, from R.A. Hoey, Superintendent Welfare and Training, 26 February 1943 and letter to Indian Affairs Branch from F. Matters, 3 March 1943.

⁵⁹ RG 10, Volume 3199, File 504 178-5, letter to R.A. Hoey from C.A. Primeau, 10 August 1943.

⁶⁰ This period of time, six months, may be significant. By the *Indian Act* people absent from the reserve could be stricken from the Registrar and had six months to protest this.

homes where they would be working.⁶¹ At no time were the domestics met at the station by their employers.

Allowances for clothing were made so that the domestics would appear “presentable,” suggesting the ways in which domestic labour in fact was a gendered representation of the department itself. As these women would have had their own clothes, there is another possible reason for this provision: it was an incentive. Likely, it was both. Clothing in one case included a coat, and in another a pair of RCAF (Royal Canadian Armed Forces) shoes. But it is significant that in another case, a domestic was refused because it was indeed suspected that she had agreed to the program because the department would “supply her with a full new outfit of clothing” and that she would “only stay a couple of weeks and might spoil the chances of some other Indian girl wishing to go to Ottawa to work at some later date.”⁶² It was also made clear that only registered Indians would have transportation and clothing covered. One domestic, who was the daughter of an enfranchised Indian, was informed that she would have to reimburse the department for any expenses regarding her placement, in that case, the cost of transportation.⁶³

As with so many of the working conditions of domestics more generally, the wages, hours of work and responsibilities of Aboriginal domestics in this program ranged. According to Hoey, wages were to start at \$20 per month and increased

⁶¹ RG 10, Volume 3199, File 504 178-5, letter to R.A. Hoey, from F. Matters, 15 April 1943, letter to F. Matters from R.A. Hoey, 17 April 1943 and letter to F. Matters from R.A. Hoey, 27 April, 1943.

⁶² RG 10, Volume 3199, File 504 178-5, letter to H.P. Ruddy, Indian Agent, Golden Lake, from R.A. Hoey, Supt. Welfare and Training, 12 Sept 1943, and letter to Indian Affairs Branch from H.P. Ruddy, 2 October 1943.

⁶³ RG 10, Volume 3199, File 504 178-5, letter to R.P.G. Laurence from R.A. Hoey, Ottawa, 5 July 1943.

according to qualifications and ability. He noted that several girls earned \$35 per month, with room and board. In only one instance was a domestic offered more than \$35 (she was offered \$38 per month including three meals per day and out of which \$15 would account for a room somewhere in the neighbourhood), and this was to lure her away from a more lucrative job at a tourist resort. In another case, a domestic took a five-dollar pay cut from her domestic job in a residential school because the employer only agreed to raise her salary if she was “qualified.”⁶⁴

Vacations were no small matter for the program, especially considering that the domestics had relocated for work. The case of two domestics who went to Ottawa together and were deprived of a trip home is illustrative of the philosophical and administrative vision of Indian labour by the department. Each had been in Ottawa for a full year, and their return home for a vacation was anticipated by their principal, the students at their school and their families. A vacation would, the principal argued, not only benefit the domestics, but also give a good “impression in regard to post-graduate employment in Ottawa” to “new prospects.” At first Morris and Hoey agreed with him and the domestics who wanted to return home for a break, agreeing that their absence made “Ottawa less attractive to the bigger girls and will prejudice them against going there.”⁶⁵ However, they ultimately sided with the employer’s demands.

⁶⁴ RG 10, Volume 3199, File 504 178-5, letter to J.W. Daley, Indian Agent, Walpole Island from R.A. Hoey, 26 June 1943, letter to Mr. C. R. Johnston, Indian Agent, Manitowaning Ontario from R.A. Hoey, 27 July 1943, letter to Mr. Hoey from F. Matters, 15 April, 1943 and letter to F. Matters from R.A. Hoey, 17 April, 1943.

⁶⁵ RG 10, Volume 3199, File 504 178-5, letter to J.E. Morris from C.A. Primeau, 11 June 1943.

One domestic had worked at the Ottawa General Hospital, then shifted to private domestic work for eight or ten months before returning to the hospital.⁶⁶ Because she had not been working steadily at the hospital, she could not obtain leave with pay. In her case, the department argued, "We feel that if the Indian girls cooperate with the people with whom they are working when the time comes that there are many other girls looking for domestic work the services of the Indian girls will not be dispensed with and the white girls given the preference. It is our hope that they will establish themselves in a permanent way as domestics."⁶⁷ The other, who had been working for Senator Cairine Wilson, had advised the Welfare and Training office in April that she wanted to go home in June. But when Mrs. Wilson was contacted, she stated that she had made arrangements for the whole family and staff to go to her St. Andrews estate in New Brunswick for the month of July and August, and that it was her practice to not give holidays to the staff until they returned to the city. She thought that if her Indian domestic were permitted to go home, it would create a precedent of privilege and entitlement among other members of her staff.

Needless to say, this solution caused dissatisfaction for friends and family back home, from whose point of view, the girls deserved a visit home. Appeasing the demand side of the labour equation, however, outweighed the desires of both the department to encourage more labour and the workers themselves to go home. This is somewhat ironic, as the department knew it could not supply enough labour to meet the demand, nor could it even anticipate this ever happening. But once the department was "constantly

⁶⁶ Hospital work is not as well-paid as work at private homes, but might have afforded more freedoms.

⁶⁷ RG 10, Volume 3199, File 504 178-5, letter to C.A. Primeau from R.A. Hoey, 14 June 1943.

receiving requests to obtain Indian girls to work as domestics in homes in Ottawa,”⁶⁸ it felt obliged to fill them, above all else. This included attempting to fill requests partway through the school year, denying vacations and requests for transfers and siding with the employer when questions about working conditions and wages arose. This obligation became all the more urgent when a girl left or threatened to leave a home as was quite frequently the case. One Indian Agent practically begged the reluctant mother of one student to allow her to go, promising special arrangements for night school and assuring her of her daughter’s “kindest treatment” and “good supervision.”⁶⁹ It is revealing of the artificial labour market the department attempted to control and of its efforts to remove labour power from the hands of Native women and put it directly into the hands of their employers.

Who were those “responsible women” who ordered up domestics from the Department of Indian Affairs, and where were their “desirable homes”? While not wanting to focus too much on this part of the story (these women’s public lives were clearly facilitated by subordinate Native women’s labour and there is a risk of turning again to a history of non-Aboriginal people), these employers were temporarily written into the lives of Native women and thus provoke some inquiry. Moreover, that the Department actually wanted this experiment to work suggests that it was at some level taken seriously.

⁶⁸ RG 10, Volume 3199, File 504 178-5, letter to F. Matters, Indian Agent, Chapleau, from R.A. Hoey, Superintendent Welfare and Training, 26 February 1943, and letter to Indian Affairs Branch from F. Matters, 3 March 1943.

⁶⁹ RG 10, Volume 3199, File 504 178-5, letter to R.P.G. Laurence, Indian Agent, Sault Ste. Marie from R.A. Hoey, 7 July 1943.

This program was in many ways very different from others in the US and in Australia, where Indigenous domestic labour has been understood, like child removal, as the work of progressive women's movements, not just in terms of 'saving' Indigenous women from their background, but also from 'predatory' white men. But while the Ottawa employers themselves may have subscribed to similar ideals, they did not run the program, or, it seems, have any real influence in it except in their own homes. Instead, it appears that they fully relied on the DIA and its staff to do the placement work. All of those working on this project were non-Native men (and in other contexts called 'predatory'), except for the principal of the Girls School in Spanish, Ontario. The employers may have been club women with a particular drive to 'assist' Indians, or religious women hoping to continue the assimilatory goals of the residential schools, but they acted as an extension of Departmental control and discipline in an off-reserve setting. Hiring an Indian domestic was likely thought of as a modern, safe, and appropriate (and profitable) way to appear publicly engaged with the "Indian Problem."

The domestics placement program seems to have had a link with high-ranking government officials and elite Liberal circles, including senators. Senator Cairine Wilson and Mrs. Dorothy (A.C.) Hardy stand out. Wilson, the first woman named to senate, was involved with the Victoria Order of Nurses, the YWCA, the Salvation Army, and later in the 1940s was on the Senate Committee of Immigration and Labour. She had eight children, and would have been in her late fifties when she became involved in the program. Wilson lived in Rockcliffe and was likely connected to another employer, Mrs G.E. Ethel Fauquier also of Rockcliffe, through the Elmwood School, a private girls'

school popular among the daughters of Ottawa's elite. Both Fauquier and Wilson went through several Native domestics in 1943–4. One maid worked at the Elmwood School.

Dorothy Hardy, wife of Senator Arthur C. Hardy, and daughter of Senator George Taylor Fulford, also wrote the department looking for maids. After requesting a switch in domestics with a Mrs. Messer of Rockcliffe, she asked, "If you could send two to Mrs. Elmer Johnston and two to the Brockville Shelter, I think they would be very glad of good maids and there would be the companionship for them."⁷⁰ Hardy's father had run a Home for Elderly Women in Brockville (the Fulford Home) and she and her husband had bought the Brockville Home in 1934. They may have continued to run the home. Hardy would have been in her early sixties.

Native domestics were also hired to work at the Roxborough Apartments, built in 1910 for prestigious people with ties to the government. At least two federal government employees acquired maids. Mrs. W.J. McCarthy, supervisor of the secretarial staff of the National Selective Service's mobilization section, Department of Labour, wanted a domestic for her mother, Mrs. Elizabeth McCarthy. Mrs. Camsell, the wife of Dr. Camsell, geologist and deputy minister of the Department of Mines and Resources (under which Indian Affairs fell at the time), as well as the namesake of the Charles Camsell Indian Hospital in Edmonton, went through several maids in the program. The names of the other employers are more difficult to find more information about. The wife of Dr. C.B. Petrie (7 Lambton Road, Rockcliffe), Mrs. Boggart of Rockcliffe, Mrs. S. Palef (99 Charlotte Street), Mrs. E.A. Evans (660 Rideau Street), Mrs. A.F. Rogers or F.F. Rogers (251 Cooper Street), Mrs. Wilgress and Mrs. F.A. Heney, 145 Richmond Road each went

⁷⁰ RG 10, Volume 3199, File 504 178-5, letter to J.E. Morris, from A.C. Hardy, 30 April 1943.

through at least one and up to three or more domestics between 1943 and 1944. There were few details about why the terms of employment were so brief (whether this was employer or employee driven), however in many cases, this may have been due to the nature of the work itself.

Hospitals, too, were interested in obtaining domestics through the program. Sister St. Jacob, Superintendent of the Ottawa General, requested that the department supply ten “girls” of fifteen years of age or older to work at that hospital. Originally, four students were approved to be discharged from the Spanish Residential School, however the parents of two of objected.⁷¹ Other places were altogether unsuccessful in obtaining domestic labour from this program.⁷²

In other investigations of Indigenous women in domestic situations, the domestic sphere has been referred to in Mary Louise Pratt’s “Contact Zone” language: in the homes, the women re-enacted/re-negotiated a colonial contact situation in which influence, power and knowledge went in multiple directions.⁷³ While hiring a domestic may have put elite women in a “contact zone” of sorts with other elite Ottawa women, I am not sure that their domestic interactions with Native women amounted to as much.

⁷¹ RG 10, Volume 3199, File 504 178-5, letter to Reverend James Howitt, Principal Indian Residential School, Spanish from R.A. Hoey, Superintendent of Welfare and Training, 26 March 1942, letter to Sister St. Jacob, Superintendent Ottawa General, from R.A. Hoey, 26 March 1942, letter to Sister St. Jacob from R.A. Hoey, 6 May 1942, letter to Sister St. Jacob from R.A. Hoey, 26 June 1942, letter to C.A. Primeau, Principal, Indian Residential School, Spanish from Philip Phelan, Chief, Training Division, 12 June 1942 and letter to Philip Phelan from C.A. Primeau, 13 June 1942.

⁷² Unsuccessful applicants for domestics through this Indian Affairs program included the St. Charles (nursing) Home, the Good Shepherd Refuge in Sudbury and the Mackay Institution for Protestant Deaf Mutes.

⁷³ Mary Louise Pratt, *Imperial Eyes: Travel Writing and Transculturation* (London: Routledge, 1992), Victoria Haskins, “On the Doorstep: Aboriginal Domestic Service as a ‘Contact Zone’,” *Australian Feminist Studies* 16:34 (2001), 13-25.

Moreover, if the assumption were, as it is in other secondary sources on Indigenous domestics, that the homes would act as “arenas” of colonization, “object lessons” in domestic civility, and “domestic frontiers,” they would have missed the mark by a long shot, too long to take this rationale seriously.⁷⁴ The program had only ever endeavoured to send domestics for six months and it is clear from the number and frequency of resignations that they often did not stay that long.

One of the few letters in the files written by one of the domestics outlined the unsatisfactory conditions she worked in at the home of Dr and Mrs. Petrie and requested a transfer.

Mr. Morris really I don't like to go back to work ... cause [she's] cross at me one minute, the next minute she's nice. The oldest girl is very naughty. She used to slap my face. I don't feel like as if it's my home there. I'd love to work another place where a person can always be nice to me also the children. Many times I use to cry. So Mr. Morris I will love to work another place where there is only one child I love children alright but not when they tell me to shut up or tells me to come back home.

The response from the department was to continue working at this place, and to convince her of the positive features of the situation:

They have been very kind to you in that they provided you with holidays with pay. ... My idea is that if you continue working and endeavour to bank some of your money, together with your separation allowance, when the war is over you will have a nice bank account which will enable you and your husband to set yourselves up properly keeping house and perhaps have a small farm. ... It looks like a real opportunity for you to save money and plan for your future happiness.⁷⁵

⁷⁴ Jane E. Simonsen, “‘Object Lessons’: Domesticity and Display in Native American Assimilation,” *American Studies* 43 (Spring 2002), 75–99, Margaret D. Jacobs, “Working on the Domestic Frontier: American Indian Domestic Servants in White Women’s Households in the San Francisco Bay Area, 1920–1940,” *Frontiers* 28:1 and 2 (2007), 165–199 and Victoria Haskins and Margaret D. Jacobs, “Introduction,” *Frontiers* 28:1 and 2 (2007), ix–xvi.

⁷⁵ RG 10, Volume 3199, File 504 178-5, letter to Mr. Morris from a domestic 1 July, 1943 and letter to a domestic from Mr. Morris, 5 July, 1943.

This correspondence reminds us that Native domestics measured, observed and perhaps influenced non-Native families. But we are left here not with a racial and class “contact zone” between women, but rather assertions of authority and licence associated with whiteness and class, even by the hands of children.

It is clear that Native domestics in many cases got what they had bargained for. They likely went to Ottawa for social reasons, to be with and make friends in the city. In many cases they just wanted to see the city itself and make some spending money. When disappointed, most did not last very long in the same place. Participation in the program was initially done on a temporary basis only and most returned or found work elsewhere. It is important to remember that they had other options. Mid-war, work in munitions plants was available and in the domestic field, tourist resorts provided work that was by all accounts a lot more fun. The department favoured domestic work in this placement program over both of these options, the first, because “as soon as the war is over most munition [sic] workers will be out of jobs, whereas, the girls who are doing satisfactory domestic work will be retained”;⁷⁶ and second because resorts were mainly seasonal and did not provide “proper supervision.” These justifications suggest that in the department’s view, relocated domestic labour was to be a permanent occupation for Native women. This was not the case, however. One Indian Agent’s efforts to lure two young women away from a tourist resort job to work in Ottawa for less money failed miserably even as he tried to involve the parents.⁷⁷ In another case, one of the girls had found housework in a hospital and preferred to go there, as she knew two other of the

⁷⁶ RG 10, Volume 3199, File 504 178-5, letter to Daley, from R.A. Hoey, 26 June 1943.

⁷⁷ RG 10, Volume 3199, File 504 178-5, letter to Indian Affairs Branch from C.R. Johnston, 9 July 1943 and letter to C.R. Johnston from R.A. Hoey, 20 July 1943.

hospital's employees.⁷⁸ Moreover the department frequently declined requests for "Indian girls" in eastern Canada where work was plentiful and more remunerative nearer to home or on the American side.⁷⁹

As this popular alternative of transnational labour for Native people suggests, Native wage work is not simply "Canadian" labour. It was subject to the state through *Indian Act* law, a layer of legislation that separated Native labour, as immigration law separated that of other non-Canadians in Canada. In the 1940s, for example, Native people were still commonly thought of as wards of the state. Wards, like minors without guardians, were subject to the parental care of the state – a category under which, theoretically, all status Indians and Inuit fell until 1961. The Indian Affairs Department worked effectively as attentive middlemen in labour arrangements between employers and wards (which included the parents of the employees as well as employees themselves). The double-edged sword of departmental supervision was that while the domestics made several claims on them in terms of transportation, clothing, holidays and placement with friends and family members, so too did their employers, who felt obliged to alert the department of any dissatisfaction.

Can wards work for wages? Ward status was not a full and complete status through which Indian labour was uniformly defined, but rather only a clarification in certain cases where "free will" was questioned. For example, in a late 1950s INCO labour dispute with the International Hod Carriers, the department was questioned as to

⁷⁸ RG 10, Volume 3199, File 504 178-5, letter to C.A. Primeau from R.A. Hoey, 7 July 1943.

⁷⁹ RG 10, Volume 3199, File 504 178-5, letter to R.A. Hoey from Sister Marcelline, Superior St. Charles Home, Ottawa, 10 May 1942, letter to Sister Marcelline from R.A. Hoey 18 May 1942, letter to Several Agents from R.A. Hoey, 18 May 1942, and letter to the Reverend Sister from Indian Agent, St. Regis, 22 June 1942.

whether Indians, as wards of the state, were exempt from mandatory union membership, or whether they worked under “free will” and could therefore be subject to union law.⁸⁰ Unlike recruitment of immigrant domestic work, which relied on debt, contracts and ‘citizenship’ as incentives to work, Native people could come and go as circumstances allowed. Ambivalence on the part of the department around domestic work rested on this capacity, and its suggestion of liminal participation in the workforce, partial acceptance of work ethic and the possibilities of freedom to spend time as and with whom they wished. In the domestics program, the word “ward” arose only in moments of uncertainty: to authorize (not compel) work without parental permission, and to take steps to discipline Native women workers in an off-reserve setting.

The state treated all Indian labour as principally ward status. However, in the program, the domestics were not always status Indians, many were nearing or over the age of majority and most of them had parents or guardians who were active in family decision-making. These three determinants also helped to define what “ward” meant in practice. One domestic who was just under the age of 21 questioned this status after her father and aunt forced her to return from working at a sanatorium in the United States. Not sure of her rights, she asked the Indian Agent, who in turn asked the department, if she was free to leave home to accept employment. The Branch decided that “under the circumstances there would not appear to be any justification in having this girl return from remunerative employment. It is quite true that she may be of service at her grandmother’s home ... but it must be remembered that she has reached a stage in life

⁸⁰ RG10, Volume 8421, File 501/21-1, Manitoba Region – General Correspondence Regarding Placement of Indian Labour 1954-1965, letter from H.G. Sprott to Labour Temple, International Hod Carriers, Common Labourers Union of America, 14 July 1959.

where she will have to have some training along definite lines to assist her later on. It is very doubtful if she can obtain such training under home conditions as they appear to exist.” He suggested that she “agree to contribute a certain amount weekly towards the upkeep of the home table in lieu of her father agreeing that she go off the reserve to receive employment.”⁸¹ In this case, the category “ward” was not used to compel her to work against her will, but it did force her parents to allow her to pursue her wish to work.

Unlike Ron Laliberte in his work on sugar beet labour in the 1960s,⁸² I did not find any evidence of blatant coercion to work, such as withholding rations and welfare, however this knowledge may well be local. It appears as if ward labour status was defined most commonly by the associated responsibilities of the department. The management of bank accounts and annuities, for example was one of the department’s responsibilities to its wards, and this is especially evident for those domestics who became indebted while in Ottawa. One sixteen-year-old student whose father had enlisted in the army was first matched with Mrs. F.A. Heney at her “very lovely home” on Richmond Road in the summer of 1943. There is a gap in the correspondence until March 1944, when it is clear that she had transferred at least once and had most recently been working at the Elmwood School in Rockcliffe but had left that position in February. While at Elmwood, she had incurred a telephone bill amounting to \$18.60 for two calls to Timmins and the school requested that the department collect on it. The request went

⁸¹ RG 10, Volume 3199, File 504 178-5, letter to Indian Affairs Branch from C. Roberts, 21 February 1944 and letter to C. Roberts from R.A. Hoey, 23 February 1944.

⁸² Ron Laliberte, “The ‘Grab-a-Hoe’ Indians: The Canadian State and the Procurement of Aboriginal Labour for the Southern Alberta Sugar Beet Industry,” *Prairie Forum* 31:2 (Fall 2006), 305–324 and Ron Laliberte and Vic Satzewich, “Native Migrant Labour in the Southern Alberta Sugar-Beet Industry: Coercion and Paternalism in the Recruitment of Labour,” *The Canadian Review of Sociology and Anthropology*, 36 (1999), 65-86.

through Hoey to the agent, who involved the RCMP in trying to locate her. In the meantime, the agent decided to “not pay her any treaty money.” Along with a signed statement authorizing the Indian Affairs Branch to apply her annuity towards the debt until the account was paid in full, she also sent a letter arguing, “As you know I haven’t had my treaty money for the last three years, so that’s twelve (\$12) dollars I have already payed and I still owe you six dollars and sixty (\$6.60).” This information was, however, disregarded and C. Roberts, of the Welfare Division, agreed to have funds paid out directly from her savings account. D.J. Allan, Superintendent of Reserves and Trusts, paid \$8.53 by emptying the account and agreed that her 1945 annuity could be forwarded, but notified the agent that procuring treaty money was not the desired course of action, and if the Elmwood school wished to collect on the balance owing, they would have to do it themselves.⁸³ In two other cases, the department helped themselves to domestics’ savings accounts and trust accounts, one to pay off a debt incurred while working at the Ottawa Civic Hospital⁸⁴ and the other to pay fees associated with hospital confinement.⁸⁵

In terms of those who qualified to obtain the access to Indian education funds and health services, an “Indian” (as opposed to modern) “mode of life” was the official

⁸³ RG 10, Volume 3199, File 504 178-5, letter to Indian Affairs Branch from F. Matters, 15 July 1943, letter to F. Matters from R.A. Hoey, 19 July 1943, letter to Indian Affairs Branch from F. Matters, 21 July 1943, letter to Mr. Morris from Secretary, Elmwood, March 3, 1944, letter to F. Matters from R.A. Hoey, 29 April 1944, letter to Indian Affairs Branch from F. Matters, 4 May 1944, Office of the Indian Agent, Toronto Ontario, Signed Statement, 10 August 1944, letter to F. Matters, 10 August 1945, Memorandum, Superintendent, Reserves and Trusts Mr. A.G. Leslie, from C. Roberts, 17 August 1945, letter to F. Matters, from D.J. Allan, 22 August 1945, letter to Allan from Roberts, 22 August 1945, and letter to Mrs. Buck, Matron, Elmwood School from C. Roberts, Welfare Division, 31 August 1945.

⁸⁴ RG 10, Volume 3199, File 504 178-5, Memorandum to Indian Affairs Branch, Ottawa 4 May 1944.

⁸⁵ RG 10, Volume 3199, File 504 178-5, Department of Mines and Resources letter, 18 Nov 1943. This was before universal health care coverage.

defining requisite. For the girls in this program, however, mode of life did not bare much weight in terms of their ability to escape the surveillance and discipline of Indian Affairs in this program, and their status as both wards and workers makes this clear. The department involved itself freely in their funds as well as their off-work time, even as they worked in modern homes in Ottawa. There was no doubt in anyone's minds that these were, in fact, modern Indian girls and regardless of their 'mode of life,' they would continue to be subject to the state. One does get the distinct impression that many merely moved from one institution to another; one went to the Salvation Army Rescue Home, one to St. Mary's Home, one to the sanatorium in Hull,⁸⁶ two who gave birth had the Children's Aid Society contacted, and the marriages of two were investigated. Two attempted to enlist in the Canadian Women's Army Corps (one failed).

While the term "ward" was not consistently used, the terms "Indian girl," "Indian maid" and the even more jarring term "Indian maiden" were, suggesting the extent to which the work of domestic service had particular meanings and history when Indian women did it. Historian Mary Kinnear argues that the term "girl" was shorthand for the contemporary assumption that paid working women would be both young and single.⁸⁷ The fact that in some cases they were not single, not unmarried and not without children was more a statement about impropriety. To be expected to work hard for wages at the age of 14, for example was not unusual. Domestic labour did however, correspond with a stage of life for many – one that is significant for a number of reasons. Often this was a stage of life when women went travelling around with friends, crossing borders of all

⁸⁶ RG 10, Volume 3199, File 504 178-5, letter to F. Matters from R.A. Hoey, 26 February 1943 and letter to Indian Affairs Branch from F. Matters 3 March 1943.

⁸⁷ Kinnear, *A Female Economy*, 23.

types. And it was a stage of life when the written and unwritten rules of racism and social class came to be understood and, in many cases, most profoundly and publicly resisted. This is why “supervision” is the most predominant theme in the departmental records about women of this era.

“Indian maiden” and “Indian maid” also carry the discourses of popular literature and culture; it is part of that fantasy of Indian princesses – beauty through docility and deference. Maid and Maiden associated the Indian woman with the home—a space which always and already represents moral uplift and assimilation; the incorporation of Native women into the nation by defining their domestic work as the fuel for evolutionary progress.⁸⁸ Indian maids and Indian maidens were also box-office hits; as the “femme fatales” of forties films, they personified fantasies of female sexual power irresistible to white men, inherited and passed down through Indian blood.⁸⁹ In Department of Indian Affairs form, “Indian maids” stood for a less racy but no less compulsive desire to supervise, discipline and rescue Native domestics.

⁸⁸ Anne McClintock, *Imperial Leather: Race, Gender and Sexuality in the Colonial Context* (New York: Routledge, 1995).

⁸⁹ M. Elise Marubbio, *Killing the Indian Maiden: Images of Native American Women in Film* (Lexington: University Press of Kentucky, 2006). Aboriginal housekeepers and their work share an important cultural space as symbols of survival and wisdom, healing and the maintenance of health, stewardship of houses and the land and a history of hard work and independence. Two Canadian films, *Cold Journey* (1975) and *Loyalties* (1987) touch on some of these themes and comment more broadly on racism and power in Canadian society. In *Cold Journey*, an NFB film that dealt with abuse and deaths resulting directly from the conditions in Indian Residential Schools, Johnny Yesno plays “Charlie,” a janitor at Guy Hill Residential School. In that role, he is an important mentor and councillor to students at the school and talks to them about what it means to be Indian. In *Loyalties*, Rosanne Ladouceur, played by Tantoo Cardinal, becomes the Métis nanny for an English doctor and his family. In that role, she plays councillor and ethical guide and instructs the lady of the household in her roles and responsibilities as a strong woman, as opposed to just a dutiful wife. It is significant that otherwise marginalized figures of dominant society, the janitor, cleaner and housekeeper, are located centrally as the ones who are able to both maintain the link to the past and teach longer-term life skills.

Two cases involving two 17-year olds, Doris and Kitty, who refused to submit to the department illuminate some of the ways the department supervised and disciplined Native domestics and reveal how vulnerability could turn into incorrigibility from the point of view of the department. For Native women in particular, the department wanted to take steps on such matters. As has already been shown, it was heavily invested in the image of Indian girls as domestic workers, and in encouraging their employment by upper-middle class and elite white women. Doris went from being recommended as a “good type of girl” by Principal Strapp at the Mount Elgin Residential school, to being accused of being “restless and not amenable to discipline” and possibly “mentally unbalanced or definitely sub-normal” in a matter of four months and three placements, including Mrs. Camsell’s home. Indications of her “mental unbalance” included neglecting to take her “ration book” with her when she left for Ottawa, losing her (Indian?) registration card and failing to turn in an application for another, which she was told to “carry ... with her all the time.” Kitty had been “tried as a domestic in Ottawa and found wanting.”

The initial disciplinary action in such cases was to haul the domestics into the office for a “sound talking to” and then send them back to work for an additional “trial.” The next step was to send the girls home or back to school to work or to have them render service as a domestic in a rural home for “solid domestic training” and “extra supervision.” Once found to be “improved in manners, outlook and ability,” “competent to go to work” and showing “no sign of Tuberculosis,” Kitty was sent back to Ottawa to work for Mrs. Heney, where, three months later, she was found “unmanageable – staying

out very late.” At this point, she was hauled back to the office for questioning and another ultimatum – an “additional” six-week trial, along with weekly reports on her.

The ultimatums did not work in either case. Kitty avoided going to the office when called and lied to officers once she was there. When the department discovered that she had been staying at a hotel “apparently in a room with some man,” she was deemed “incorrigible” and sent to the Salvation Army Rescue Home while Hoey and Matters contemplated what punishment was in order: sending her home to her family (which is what she wanted); placing her “in the care of some responsible Indian family who would report her actions ... monthly;” sending her back to the residential school; or incarcerating her in a detention home. Matters argued that “six months in a detention home, where she would get lots of hard work and little or no reward, would be the best cure for her.” Knowing her record, he could not recommend a position as it “would not be fair to the other Indian girls who are good, [and] as she apparently has no intention at present of trying to go straight, to place her with any other family would mean we would have to keep her, this also is not necessary or should not be necessary, as she is capable of working for herself.” Moreover, her father was “unreliable,” her mother was dead and his “second wife is not much better than he, however he may have more influence over her than anyone else, but I am afraid that she will go wrong there also.” Matters ultimately left it to Hoey, recommending the detention home for six months and then back to the residential school or to her home, where, he said, “if she is going to go wrong, let her go wrong with her own people responsible.” The agent added, “if she were left here then I know that [her father] would feel that the department or myself were responsible if anything untoward happened to her.”

Doris refused the opportunity to take work as a domestic near the reserve. Found to be “out every night with men and living at a very undesirable home,” the agent sought advice from the department on whether she should be placed in an institution of correction “before she gets into serious trouble.” Hoey attached a copy of Chapter 384, *The Female Refuges Act*, Section 15 Subsection B, in the Revised Statutes of Ontario, to his response. Because “[she] is a ward of the Indian Affairs Branch,” he argued, “we are responsible for her good behaviour. If she is leading a dissolute and idle life then she can be committed with the approval of the local magistrate to the Merser [sic] Reformatory in Toronto. Any costs in connection with her transportation and maintenance at this institution will be paid by this Branch.”⁹⁰ Knowing the contemporary connotation of those words “dissolute and idle life” as a public rejection of chastity, childbirth outside of marriage and the sale of sex, this squarely aligned the department with contemporary Canadian sexual regulation of women.⁹¹ Under the *Female Refuges Act*, punishment did not require proof that a crime had been committed, but rather knowledge from any source about behaviour suggesting promiscuity, illegitimacy or venereal disease. For Native women, the time of day they associated with men (ie, after work) and their use of cars and telephones were all interpreted as degrees of incorrigibility. These were also

⁹⁰ RG 10, Volume 3199, File 504 178-5, letter to R.A. Hoey from Principal Strapp, Mount Elgin, 13 March 1943, letter to Principal Strapp from R.A. Hoey, 16 March 1943, letter to Tuffnell, Indian Agent from R.A. Hoey, 13 July 1943, letter to Frederick Tuffnell from R.A. Hoey 28 July 1943, letter to Indian Affairs Branch from F.W. Tuffnell, 17 August 1943, letter to F.W. Tuffnell from R.A. Hoey, 20 August 1943, letter to Indian Affairs Branch from F. Matters, 1 Sept 1942, letter to F. Matters from R.A. Hoey, 4 Sept 1943, letter to Indian Affairs Branch from Matters 30 Sept 1943, letter to F. Matters from R.A. Hoey, 6 October 1943; letter to F. Matters from R.A. Hoey, 17 January 1944 and letter to Indian Affairs Branch from F. Matters, 2 January 1944.

⁹¹ See also Velma Demerson, *Incorrigible* (Waterloo: Wilfred Laurier University Press, 2004).

modern, urban activities and what in other contexts would be called “leisure” or “amusement.”⁹²

Marriage, which on the surface, appears to resolve many of these concerns, was also heavily regulated. What did it mean to regulate marriage? Regulation is sometimes depicted in the historical literature pertaining to intermarriage as prevention altogether. For the branch, it meant evaluation, and sometimes intervention by removal for work. In the records pertaining to this domestics program, two marriages were investigated. The first was Minnie, a 21-year-old who had graduated from Shingwauk and had worked as a housekeeper in Sault Ste. Marie and most recently at Chapleau. According to Matters, she was “very intelligent, good living and a good worker,” but since taking a domestic post at Chapleau, “had got acquainted with a chap, white man, who is a bad character ... past any reformation.” Matters was worried that Minnie was “under the delusion that she had reformed him and was going to marry him,” so he endeavoured to “open her eyes to his way of living,” and expected to have him sent to jail for a second offence of “supplying liquor to Indians.” On Minnie’s behalf, he inquired about the possibility of sending her to Ottawa to work as a domestic. As it turned out, “Mrs. G.E. Fauquier, Manor Road, Rockcliffe” was “very anxious to have” her and Hoey was happy to make arrangements. Also, he congratulated the agent on his handling of this case: “the officers here feel that she should be very grateful to you for taking the interest to advise her and to

⁹² Lynne Marks, *Revivals and Roller Rinks: Religion, Leisure and Identity in Late Nineteenth Century Small Town Ontario* (Toronto: University of Toronto Press, 1996), Margaret Little, *No Car No Radio No Liquor Permit: The Moral Regulation of Single Mothers in Ontario 1920–1997* (Toronto: Oxford University Press, 1998) and Kathy Peiss, *Cheap Amusements: Working Women and Leisure in Turn of the Century New York* (Philadelphia, Temple University Press, 1986).

guard against marrying this white man, which would only mean disappointment and hardship for her for the rest of her life.”⁹³

In the nineteenth century, programs promoting the immigration of poor white women as domestics envisioned a particular role for them in the settlement process; they were supposed to tame white men and encourage them to settle down in white marital homes and have white legitimate children. Here, we see something completely different: domestic service placement was used to separate relationships between Native women and white men who would ultimately disappoint them. This separation was not an outright recognition of paternalist racial violence associated with colonialism as it was elsewhere. As Sangster argues, “the ideological outcome of a century of colonial efforts to ‘tame’ native women’s sexuality was the heightened ‘sexualization’ of all aspects of their lives, making them the inevitable target of legal and social regulation by the twentieth century.”⁹⁴ Under the supervision of Ottawa homes, with a highly controlled work environment that followed through to free time, these Native women would ideally be kept away from any men at all.

In another case, the department investigated the intended marriage of Helen, a twenty-six-year old of “excellent moral character” who worked in Ottawa as a domestic placed in the program, to Jack, a Native private in the Royal Canadian Army Service Corps at Borden. Before the wedding, Jack’s commanding officer contacted Morris for a

⁹³ RG 10, Volume 3199, File 504 178-5, letter to R.A. Hoey from F. Matters 15 April 1943, letter to F. Matters from R.A. Hoey, 17 April 1943, letter to Indian Affairs Branch from F. Matters, 24 April 1943, letter to F. Matters from R.A. Hoey, 26 April 1943 and letter to F. Matters from R.A. Hoey, 27 April 1943.

⁹⁴ Joan Sangster, *Regulating Girls and Women: Sexuality, Family and the Law in Ontario, 1920–1960* (Toronto: Oxford University Press, 2001), 186. See also Jean Barman, “Taming Aboriginal Sexuality: Gender, Power, and Race in British Columbia, 1850-1900,” *BC Studies* 115-16 (Fall-Winter 1997-98), 237-67.

character reference for Helen. In turn, Morris decided that he would obtain information regarding Jack's character and family on his way up to the cottage. It turned out, Jack had a police record, had been incarcerated twice, fined twice and had a suspended sentence for several offences, including theft, breaking, entering and theft, depositing glass on highway, and driving without a chauffeur's license. Hoey wrote to Helen's old principal and told him of the record, urging that "every effort [be] made to persuade her to give up any thought of marrying him." Hoey repeated the advice of a local mayor, that if Helen "is a good Indian girl, under no circumstances should she marry" Jack. He also asked the commanding officer not to approve of the marriage at least until the fiancé had "over a period of time, prove[n] that he has mended his ways and that he intends to settle down." The local priest had contacted Helen's parents and requested the department send her home because they were quite distraught. Not wanting to "disrupt" Helen's working arrangement with the Petries, Hoey refused, but agreed to send her home two weeks later. In the meantime, Jack's commanding officer advised the department that he had been "paraded before his Company Commander and states that ... Helen is fully aware of his past police record and is quite willing to marry him in spite of the same." Also, he stated that "a year had passed since he had been found guilty of an offence, and that he has learned the error of his ways and intends to keep out of trouble in the future." Apparently the parents were in fact informed, and were very unhappy, requesting that the department send her home at once. But the Petries refused and the department, as always, sided with the employer.⁹⁵

⁹⁵ RG 10, Volume 3199, File 504 178-5, letter to C.A. Primeau from J.E. Morris, 30 July 1943, letter to Whom it May Concern from Morris, 30 July 1943, letter to J.E. Morris from Chief Constable, 31 July 1943, letter to C.A. Primeau from R.A. Hoey, 5 August

Word about the “Ottawa experiment” abruptly ceases after little more than two years. While we might assume that this was because of a hierarchical race-gender trend of getting abruptly booted out of work by returning veterans, I have yet to find any other reference to this program, which suggests its marginal and temporary role in the lives of most of the participants as well as the employers. Most Native women entered into employment outside of federal surveillance like the program described here. Despite the apparent failure of this formal endeavour to place Native women as domestics, debate, interest and programming followed through in the years after the war.

Conclusion

Several employment plans were formulated in the post-war period, many similar to the Ottawa experiment. G.H. Gooderham, Regional Supervisor of Indian Agencies reported in August 1952 on an “employment plan for young Indian women coming to Calgary and Edmonton.” He reported that there “had been only one recent instance where the Department is paying the bill for accommodation. In the other cases the girls have been placed the same day they com [sic] to town, or they have been in a position to pay their own expenses.” He noted that the “Social Worker has encouraged them to do this as far as it seems reasonably possible. Nine girls were placed in employment within a period of three months, five of whom were placed through the [National] Employment Service and four through direct contact between the employer and this office.” Gooderham also noted that the Camsell Hospital had been cooperating in employment placement. Still “three

1943, letter to The Commanding Officer, Camp Borden from R.A. Hoey, 5 August 1943, letter to R.A. Hoey from C.A. Primeau, 10 August 1943, letter to C.A. Primeau from R.A. Hoey, 12 August 1943 and letter to R.A. Hoey from Colonel Commandant, 11 Aug 1943.

other girls” had asked for placement but were “discouraged from coming to town” because of a “previous poor work record” and a “tendency to promiscuity.” “It is felt,” he argued, “that an urban environment would be worse still for them.” He also noted a few others who had come to cities to find employment on their own and who had not made contact with the office or the social worker. He observed that “Domestic placements have proven successful usually, to the point even that they have led to enquiries from other prospective employers. The girls have been especially successful in caring for little children,” a factor which “made their services quite valuable to the mothers.” At the same time, while they had tried to find openings for ward aides and kitchen help in hospitals, they had no success, but when the girls tried on their own, they were successful.⁹⁶

In Alberta, a similar scheme in the mid-1960s involved a Mrs. Otter and A.J. Karch, who operated a Domestic Placement Service in Calgary.⁹⁷ In Calgary, the department would not retain fulltime employees to run a Domestic Placement Service, unless additional funds were to be made available. Mrs. Victoria Otter continued on in the program, however, and her job was “to maintain liaison with the placement candidates that are presently working and established in Calgary ... [and] to provide emergency assistance in Calgary other than cash, for candidates that find employment through their own efforts, but require limited assistance in order to become established.

⁹⁶ RG 10, Volume 8413, File 1/21-1 pt. 1, letter to Col. H.M. Jones, Superintendent – Welfare Services, from G.H. Gooderham, Regional Supervisor of Indian Agencies, 14 August 1952.

⁹⁷ RG 10, Volume 8424, File 701/21-2, Alberta Region – Consultation for Employment and Placement of Indian Labour 1954–1965, letter to Indian Affairs, Ottawa, from Regional Supervisor, Alberta R.D. Ragan Re: Placement of Indian Domestic, 24 March, 1965.

It is not anticipated that many individuals will require this assistance.”⁹⁸ In 1964, “54 Indian girls from southern Alberta were placed in Calgary homes as domestics, babysitters and housekeepers.” “The length of service ranged from a few days to over a year. In some cases the girls have gone on to other jobs or training possibilities, but have remained to board with the family.” It was observed that “Domestic work for many girls is a useful ‘first step’ to the broader experience of living and working in today’s changing society. Non-Indian families and neighbours develop a deeper appreciation, and understanding of Indian young people; the girls, in turn, obtain first-hand living and working experience with a family which will prove invaluable in years to come.”⁹⁹

In Saskatchewan in 1960, the Indian and Métis Service Council wished to meet with regional supervisors to discuss the possibility of training “suitable selected Indian girls as housekeepers” in Prince Albert. Here, it would operate closely with appointed members of the service council, as well as the Business and Professional Women’s Association of Prince Albert who were interested in sponsoring on-the-job training. In this case the service council would “play a vital role in [the] program, [by providing] supervision and counseling.”¹⁰⁰

In a letter to the chief of the Economic Development Division, Saskatchewan’s regional supervisor outlined the reasons for the limited success of domestic employment placement among Aboriginal women. First, he said, there was the limited income, low

⁹⁸ RG 10, Volume 8424, File 701/21-2, letter to Superintendent Stoney/Sarcee Indian Agency From Development Officer, Calgary, A.J. Karch, 19 March 1965, Re: Continuation of Placement Services, Southern Alberta.

⁹⁹ *The Indian News* (March 1964), 7.

¹⁰⁰ RG 10, Volume 8427, File 601/21-3, Saskatchewan Regional Office – Relocation of Indians for Employment 1957-1961, letter to Chief, Economic Development Division From Regional Supervisor, Saskatchewan re: Housekeeper Training, Prince Albert. Memorandum, 9 Dec 1960.

social status and uncertain working conditions that made the work particularly unattractive. He wrote, “[i]n most cases girls have entered this work because of lack of education and work skills required for more remunerative employment, rather than by choice. In many cases they see it as a ready resource for short-term employment, or as a stepping stone to some other type of work.” Second, there had to date been some home economics education provided in the schools, however no job-focused training program existed. The regional supervisor’s opinion was typical in that it did not reject domestic placement altogether, instead stressing the many “positives” of domestic work. Namely, these included its general accessibility to those with minimal education, its service as an “introduction to the non-Indian community,” the “opportunity” it afforded to “learn something of running a home off the reserve” and prepare for marriage, and of course because it acted as a “measure of supervision.”¹⁰¹

Overseeing the relocation and labour of those who had come to the city to seek work through a program or on their own was also within the duties of the department’s social workers. New to the department in the post-war years, social workers were especially responsible not only for labour itself but for ensuring that Native people spent their leisure time in responsible ways, away from “danger spots.”¹⁰² There were fewer than ten social workers for the entire country, so their surveillance was fairly targeted and dependent upon their connections with local religious and civic organizations. Nurses, too, through the Medical Services Branch, continued to be active in projects involving the placement of Indian domestics in hospitals, nursing stations and clinics.

¹⁰¹ RG 10, Volume 8427, File 601/21-3, letter to Chief, Economic Development Division from Regional Supervisor, re: Housekeeping Training- Prince Albert, 4 Jan 1961.

¹⁰² RG 10, Volume 8413, File 1/21-1, extracted from the Monthly Report of the Alberta Social Worker, Wills R. Broderick, April 1952.

By the late 1950s, the Placement Officer joined the Social Worker in the state's broad efforts of surveillance and regulation of Native labour. Indian Affairs Placement Officers worked with the National Employment Service to place Aboriginal women in domestic service positions in private homes, homes of chronically ill people, nursing homes and hospitals. Placements as domestics in this program were very common, even though they were seen as "casual" placements, as opposed to permanent positions involving vocational training and relocation, which was the program's original vision. It is this formal Placement and Relocation Program to which we now turn.

Chapter Three

The Permanent Solution: The Placement and Relocation Program and Aboriginal Women Hairdressers

“Well adjusted and suited for her position,” “neat and very presentable,” “eager to learn and become self-supporting,” “employer pleased,” “very satisfactory.”¹ These are some of the comments in the “social” and “vocational” adjustment section of one of the case files of a hairdresser in a mid-twentieth century federal urban training and employment program run from 1957 onwards called the Indian Placement and Relocation Program.² This program embodied the Department’s faith in the central role that “permanent placement” played in its overall goals for Indian integration into Canadian society. In this context, Aboriginal hairdressers were celebrated as symbols of successful assimilation. As a career, hairdressing was also part of the expanding urban beauty culture – one that continues to play an important role in fashioning ideas about authentic gendered and racialized identities.

¹ Library and Archives Canada Record Group 10 Indian Affairs (hereafter RG 10), Volume 8421, File 501/21-1 pt. 2, Manitoba Region – General Correspondence Regarding Placement of Indian Labour, 1957-1959, Placement Forms, October 1, 1957 to March 31, 1958.

² In government documents, the Program was variously called the Indian Placement and Rehabilitation Program, the Indian Employment Placement Program, the Placement Program and often also referred to as “a” placement program. For the purposes of this chapter it will be referred to singularly as the “Indian Placement and Relocation Program,” as I am investigating placement operations with respect to the objectives of employment and relocation.

This chapter will use hairdressing as a way to talk about Indian labour and the politics of the state on the one hand and modern Indian beauty culture on the other. In particular it will focus on the objectives of, limitations imposed on and discourses surrounding Native women's labour in federal employment programs and raise themes of class, entrepreneurship, identity and beauty culture in the Indian post-war years.

In this particular combination of the themes of labour, modernity and the state, the state will feature most heavily in the first half. Writing about the philosophy, policy and inner workings of the Department of Indian Affairs has its limits in the project of telling a history of Aboriginal people, and debates over the authenticity of this kind of written history have been brewing among historians for some time. Those critical of the absences and assumptions in policy-driven studies have looked at Aboriginal resistance and agency, while others have argued that the careful use of Indigenous methodology and an engagement with Aboriginal historical consciousness are both necessary to be accurate as a professional historian in this field. These approaches will not create superior history, however, nor are they best used as the only ways of producing history. For my part, engaging in various methods and scholarships about race, including African American, immigration/migration and whiteness studies, can also help to delineate some of the more substantial differences between people's experiences of the state and modernity. In this chapter, scholarship about race and the historical analysis of African American beauty culture, entrepreneurship patterns and politicized racial identities has inspired a range of possibilities for women's engagement in the state and modernity, including Native women in Canada. One of the more striking differences was that between 1957 and 1970, Native women's work was considered symbolic of integration for invisibility in an

urban working class culture with middle class values. Native beauty culture however, also hinged on representations of Indian modernity, Indian tradition and Indian resistance. The primary sources used here are largely the Department of Indian Affairs records, complemented by personal recollections. While it was a nation-wide program, this chapter focuses on records from Manitoba, Ontario and Saskatchewan.

The Indian Placement and Relocation Program

The following section will examine the program's founding context and vision, demonstrating that it was part and parcel of a larger and longer-standing vision for "equality" based on the integration of Aboriginal people with other Canadians and the associated termination of their distinct legal status in relation to the Canadian state. A closer look at the operations of the program is followed by the narratives it produced surrounding Native women and urban labour.

Initiating the Program

On a human resources level, the Indian Placement and Relocation Program is significant because it is the first national labour program seeking to place Aboriginal people in permanent positions in urban areas. Until then, "rural" placement – in agricultural and domestic work, on-reserve roadwork and construction, resource-based labour and some community development projects – was the target of federal efforts in the field of Indian employment. These semi-organized programs were meant to feed Native labour into Indian Affairs' infrastructure at the lowest levels of manual labour in order to deal with periodic and seasonal unemployment. The Indian Placement and Relocation Program

itself grew out of various efforts to manage the employment of Aboriginal people. While no single employment policy existed, there were ad hoc programs in public works, rehabilitation, vocational training and health services, which were usually constructed for the purposes of either reinforcing services or managing unemployment. Some of the larger-scale, project-based and seasonal employment projects handled by Indian agency superintendents and regional supervisors included sugar beet work, Mid-Canada Radar Line work, labour associated with surveying, clearing bush roads and sites for mining operations, fire-fighting, railway right-of-way maintenance and bridge repair, commercial fishing operations, iron ore processing, berry and potato harvesting, logging, mining, canning and hopfields work. The placement of Aboriginal women in housekeeping labour was managed locally by Indian Health Services, DIA, missionary and school staff.

The Indian Placement and Relocation program also coincides with a flourishing of studies and task forces on Native employment which continued into the 1970s and still today.³ Like those studies, the program was primarily concerned with the “adjustment” and management of an Indigenous population perceived to be needlessly unemployed, migratory, poor and unhealthy. As biological evolution had explained a century before, “development” and its impact on so-called ancient and static Native cultures accounted

³ Helen Buckley, *The Indians and Métis of Northern Saskatchewan: A Report on Economic and Social Development* (Saskatoon: Centre for Community Studies, 1963), Harold Cardinal, *Unjust Society* (Edmonton: M.G. Hurtig Ltd., 1969), Edgar Dosman, *Indians: The Urban Dilemma* (Toronto: McClelland and Stewart Ltd., 1972), D. B. Sealey and V.K. Kirkness, eds., *Indians Without Tipis* (Vancouver: William Clare, 1973), D.B. Sealey and A.S. Lussier, *The Métis: Canada's Forgotten People* (Winnipeg: Manitoba Métis Federation Press, 1975), H.B. Hawthorn, C.S. Belshaw and S.M. Jamieson, *The Indians of British Columbia: A Study of Contemporary Social Adjustment* (Toronto: University of Toronto Press, 1960) and Jean H. Lagasse, *A Study of the Population of Indian Ancestry Living in Manitoba* (Winnipeg: The Department of Agriculture and Immigration, 1959).

for the lower living standards of Native people. Unlike some of the employment studies, however, the Program did not concern itself with issues like racial prejudice and, later, representation, equal opportunity or affirmative action in the workforce on any level.

The Placement and Relocation program took its cue in many ways from rehabilitation programs connected with tuberculosis sanatoria.⁴ Linked to a post-war interest in the handicapped as a potential source of manpower, rehabilitation joined case finding,⁵ isolation, rest and surgery or drugs as accepted treatment for tuberculosis. Some of the larger hospitals under the jurisdiction of the Indian Health Service branch of the Department of National Health and Welfare, notably Charles Camsell in Edmonton and those operated by the Manitoba Sanatorium Board, hosted programs of rehabilitation that endeavoured to make ex-patients economically and socially “self-sufficient.” While historian Pat Grygier argues that the programs were meant to keep patients occupied in institutions “a long way from home,”⁶ they were also closely related to the economics of unemployment versus re-employment.⁷

⁴ Programs of rehabilitation and placement and relocation are often mentioned together or one after the other. Department of Citizenship and Immigration, “The Indian People of Canada,” *Citizen* 4:1 (February 1958), 18.

⁵ “Case finding” is a term used by Indian Health Services to describe its various efforts to locate Native individuals who had tuberculosis, usually by x-ray surveys, and remove them to tuberculosis sanatoria.

⁶ Pat Sandiford Grygier, *A Long Way From Home: The Tuberculosis Epidemic among the Inuit* (Montreal: McGill-Queen's University Press, 1994). Others suggested that the impetus for rehab came from patients themselves: “Operating a Sanatoria would be a simple matter if patients could be filed away and forgotten,” said one Manitoba occupational therapist in 1949, “But because this is neither possible nor desirable, they require and even demand that their time be occupied.” Sanatorium Board of Manitoba, *Annual Report*, 1949, 36.

⁷ The Sanatorium Board of Manitoba conducted a study in this period looking at rehabilitants’ “unemployment” rates and paid income tax to show how the treatment was about “investment” rather than philanthropy. Archives of Manitoba, Anatorium Board

Recovered Aboriginal patients posed a distinct problem for rehabilitation therapists, who believed that Native people's experience of ill health and treatment prevented them from being able to deal with their "former way of life." Being Native, neither were they considered able to cope away from home and outside of institutions. The TB rehabilitation plan was also specific to age and marital status. Children and older adult patients who had recovered were encouraged to return home, but "young single adults" were encouraged to take part in the rehabilitation program. When they were ready to be discharged, they were transferred to special training homes where they continued their studies, with rest periods, and prepared for further vocational programs like watch-repair, upholstery, carpentry and cabinet-making, barbering and commercial courses for men, and Practical Nurse and Nurse Assistant, stenography and hairdressing courses for women.⁸

A 1961 article in the *Indian News* about a couple who participated in the TB rehabilitation program is revealing of the gendered and racialized aspects of living and working as Indians in mid-twentieth century Canada. The Tanches (from the Mackenzie River district), were both ex-patients at Camsell Indian Hospital. John trained as a barber in his rehabilitation program at Camsell, finding a position with an Edmonton barber, and then taking his own business on a rental basis after only six months. Denise – who had been disenfranchised as an Indian when her mother married a non-Indian, but became an

of Manitoba, Aisle L Bay 11 Shelf 7 Temp Box 22, Scrapbooks Newspaper Clippings November 1960-January 1962 and January 1962-February 1963.

⁸ Much of the literature focuses on cultural and linguistic assimilation, however Dr. W.L. Falconer, a Medical Services doctor in Alberta, also outlined a sort of body-space theory of Aboriginal ex-patients, stating in 1955: "As a result of the *disease*, they are not rugged and able enough to fend for themselves on the reserves." W.L. Falconer, "Rehabilitation," *The Camsell Arrow* 9:4 (Christmas 1955), "Rehabilitation and Integration" supplement, viii.

Indian again on her marriage to John – helped take care of the shop – doing the books and putting the money in the bank – and doing some of the barbering on the side, which suggests she may have had some training in hairdressing as well.⁹ The Camsell Rehab program for women focused on homemaking skills including budgeting and banking – and its records were silent on whether these skills were taught also in the men’s rehab home.

As tuberculosis came under control in the 1960s, evidenced by shifting concerns of organizations like the Manitoba Sanatorium Board towards other lung conditions and smoking and the closure of hospitals, rehabilitation programs did not simply disappear. For example, in Manitoba, Pembina House at the old Ninette hospital was gradually converted from rehabilitation home for former patients to a halfway house for any young Aboriginal adult under the age of 17 and out of school for at least a year wanting to make that ever-illusory transition to urban life. “Treatment” included basic skills, adjustment to modern society, work preparation and the curing of “social ills.”¹⁰

The Vision of the Program

There were a number of interconnected narratives that made the Indian Placement and Relocation Program different from existing labour schemes. These were circular and interconnected narratives accessed at any point and were based loosely on three points: a theory of failing “traditional” economies, improved education and training, and the presumption that equality in Canadian society would stem from full-time employment.

⁹ “The Tanches: A Story of Courage,” *The Indian News* (April 1961): 8.

¹⁰ Garth Stouffer, “Pembina House An Aid to Many,” *The Brandon Sun*, Wednesday 7 Dec., 1966, p. 18.

The program was almost always introduced by way of a romanticized and nostalgic gesture to the unspecific Native past un-reached by modern life. This mystery history is then interrupted, usually audibly, with jarring noises of modernity like airplanes, bulldozers and cars.¹¹ The associated economic argument was that Indians were being awoken from a sleepy economy based on hunting, trapping, fishing and farming. The state's role was to help people to transition into an industrial economy so that they would not be left behind, both materially, in terms of living conditions as well as temporally, in terms of lifestyle and culture. Compounding this issue was an increasing population of Native people, which was expanding faster than "traditional means of livelihood" were ever capable of sustaining.¹² In his book *Enough to Keep them Alive': Indian Welfare In Canada, 1873–1965*, Hugh Shewell argues that "extreme poverty and dependency [of Native people] is not a direct result of their inability to be wage labourers or to engage in the dominant economy. Rather, it is the inevitable result of both the history of Indian-European encounter in Canada and the ultimate domination of Western liberal capitalism and ideology." Federal employment programs indeed wholeheartedly subscribed to a philosophy that envisioned the open, free market, coupled with the adoption of a work ethic thought to be foreign to Indian people, as the entirely successful backdrop for integration based on a principle of equality.¹³

¹¹ "Many Take Vocational Training: Employment Horizon Broadens for Indians, New Placement Service Aids Job hunters," *The Indian News* 2:4 (September 1957): 2.

¹² *Ibid.*, 1.

¹³ See for example, Employment and Immigration Canada, *The Development of an Employment Policy for Indian, Inuit and Metis People* (Ottawa: Employment and Immigration Canada, 1978), 10. "The federal government funds a number of programs with a potential for directly affecting the employment of native people. ... All have to strive for success in the context of an open economic market ... All operate with the realization that the long-term solution to native unemployment must come in the form of

Thus it followed that “unless we are prepared to let these Indians become mere pensioners of the Government,”¹⁴ an alternative means of livelihood was necessary. While the program was not often explained in such blatant fiscal terms, one officer’s interpretation is instructive. He explained in the early 1960s that each Indian cost “Canadian taxpayers” \$240 annually over and above the benefits available to all people of Canada. Therefore, he argued that it was “economically sound to help [Indians] into regular employment and to become independent” income tax-paying citizens. The cost of establishing Native people in permanent employment averaged about \$125 or \$500 for families, however, this cost was on loan and was in most cases repaid in full. Funds for the Placement and Relocation Program were approved by the treasury board of the Welfare Division of the Department of Indian Affairs, and then funnelled through the individual placement officers located in various cities across Canada, rather than using a revolving loan fund¹⁵ (which is what the welfare branch often did) or a band’s Trust Fund,¹⁶ which was used in some instances for vocational training. This was considered a

jobs in the private sector operating in national and international markets that are open and competitive.”

¹⁴ “Speech by Superintendent-General: ‘The Future of the Canadian Indian,’ *The Indian News* 2:2 (May 1956): 2.

¹⁵ The revolving loans fund was managed by the Department of Indian Affairs. The loans were for individuals and groups and lasted a maximum of five years duration. They were made for economic development purposes, including agricultural machinery, fishing, livestock and equipment.

¹⁶ The Trust Fund was made up of annuities and monies derived from Indian assets, like the sale of land, leases, timber, oil and gas exploration and gravel. Enfranchised Indians, except those who lost status through marriage, got a per capita share of the Trust Fund upon enfranchisement.

small price to pay for Indian “self-respect and independence,” and, sweetest of all, like most departmental termination schemes, it was paid for by Indians themselves.¹⁷

According to the Indian department, the “job resources and potential of the reserves are no longer adequate”¹⁸ to sustain Aboriginal people economically and that the re-settlement of Indians from reserves to urban centres was necessary. Closely associated with this, but very rarely explicitly stated, was the vision to close the reserves themselves. Historian Donald Fixico has shown that, in the United States, urban relocation was an instrument of efforts to terminate federal obligations to tribes, most notably through the removal of federal trust restrictions.¹⁹ In Canada, earlier policies of allotment and enfranchisement were not exactly reformulated in the Placement and Relocation program, and the Canadian version of the termination policy, the White Paper, was to come much later. Here, relocation was part of a policy of compulsion to integration through slow encouragement towards enfranchisement, which for Indians (except women who married non-status men) meant Canadian citizenship in exchange for a percentage of band funds and the surrender of Indian rights. For example, application forms for the program included questions about the future use of and probable income from property and personal effects owned by the applicant. The department insisted that while the

¹⁷ RG 10, Volume 8415, File 1/21-1 pt. 8, Correspondence Regarding the Placement of Indian Labour and Publication 1960–1962, meeting of the Representatives of the Forest Industry in Northwestern Ontario, Ontario Department of Lands and Forests and Indian Affairs Branch, 27 Sept, 1962, Appendix No. 2.

¹⁸ *Report of the Department of Citizenship and Immigration 1956–57* (Ottawa: Queen’s Printer, 1957), 50.

¹⁹ Donald Fixico, *Termination and Relocation: Federal Indian Policy, 1945–1960* (Albuquerque: University of New Mexico Press, 1986) and *The Urban Indian Experience in America* (Albuquerque: University of New Mexico Press, 2000). See also Kathryn Leilani MacKay, “Warrior into Welder: A History of federal Employment Programs for American Indians, 1878–1972,” (Ph.D. Diss., University of Utah, 1987).

placement officer was to record the value of property held, “there is no thought that he should influence the candidate toward the sale of personal property on the reserve ... if the man’s livelihood has been dependent on these resources. Their sale should only follow establishment in the new location.”²⁰ In this way, the Placement Program was a rehabilitation program like any other, meant to fold Indians into the broader citizenry under the guise of permanent employment and ultimately terminate the state’s special relationship with Aboriginal people.

According to a booklet on the program, the philosophy of the Placement Program followed three general guidelines: first, that it was voluntary. Indeed, nothing in the *Indian Act* compelled individuals to participate in this program, although one of the responsibilities of the agency superintendents was to find employment for Indians.²¹ In a 1958 assessment of the program, however, Native social work student Carl Latham²² observed that “all candidates [in the placement program] were approached by the Branch rather than came to the Branch to receive help towards establishment.”²³ Second, the

²⁰ RG 10, Volume 8427, File 501/21-3, Manitoba Regional Office – Relocation of Indians for Employment 1958–1963, letter to Regional Supervisor, Manitoba, from Chief, Welfare Division, 12 Sept. 1958.

²¹ Jean H. Lagasse, *A Study of the Population of Indian Ancestry Living in Manitoba* (Winnipeg: The Department of Agriculture and Immigration, 1959), 81. Agency superintendents were involved mostly in group placements in temporary or casual jobs.

²² “2 Leaders, 11 Delegates at Citizenship Seminar,” *The Indian News* (December 1961), 3. At this time, Carl Latham was a Delaware social worker covering Saskatchewan for the Indian Affairs Branch. He had a BA from the University of Western Ontario, and obtained his BSW and MSW at the University of Toronto. His study on the placement program was part of the requirements for his degree.

²³ RG 10, Volume 8424, File 401/21-2, Ontario Regional Headquarters – Consultation for Employment Opportunities and Placement of Indian Labour, 1958–1962, letter from Carl Latham to J.H. Gordon, 16 April, 1958 and letter to Carl Latham from H.M. Jones 25 April, 1958. The department worried that the study might reflect poorly on the branch, and so it was restricted until Indian Affairs itself agreed to release it. I could not find a copy of the original report, only reference to it in correspondence.

program was “selective,” meaning that it was not meant for all Native people, and the others were expected to remain on reserves. Its third guideline, however, that it was “comprehensive,” suggests that, for those who did leave, the program intended the process to be permanent in all ways. A full program of testing, funding and vocational training followed up with supervision of job performance and counselling in budgeting, deportment, punctuality and healthy recreational activities, was indicative of the DIA’s commitment to success.²⁴

The Department was most explicit that the program was part of a move towards eliminating the department itself. The end result of regular employment and its accompanying social adjustment would be that the Indian Affairs Branch would go out of existence.²⁵ Put another way by the Director of the Indian Affairs Branch, H.M. Jones, “[t]he successful employment of Indians and their satisfactory social adjustment in communities, both on and off reserves, is the terminus of all our efforts and other activities.”²⁶

The placement and relocation program operated within a second narrative concerning Indians and permanent (as opposed to casual) labour. Indians, it was argued, “cannot see much sense in going on working to earn extra money after their ordinary needs and wants have been met.” The argument followed that “useful and gainful

²⁴ RG 10, Volume 8426, File 401/21-3, pt. 4, Ontario Regional Headquarters – Relocation of Indians for Employment, 1960–1962, “Indian Employment Placement Program.”

²⁵ RG 10, Volume 8415, File 1/21-1 pt. 8, Meeting of the Representatives of the Forest Industry in Northwestern Ontario, Ontario Department of Lands and Forests and Indian Affairs Branch, 27 Sept, 1962, Appendix No. 2.

²⁶ RG 10, Volume 8427, File 901/21-3, British Columbia and Yukon Regions – Relocation of Indians for Employment 1957-1961, letter to W.S. Arneil Esq, Indian Commissioner, from H.M. Jones, 6 Feb 1957 and “British Columbia and Yukon Regions – Relocation of Indians for Employment 1957-1961.”

employment” as well as “incentive to work regularly and continuously when work is available”²⁷ would improve the standard of living, and a program was necessary to organize Indians along a full-time, predictable structure of daily employment. Examples of employment that “suited” Indians included: motor and diesel mechanic, clerical and stenographic work, appliance repair, barbering and hairdressing, accountancy, building trades, machine shop, drafting, welding, radio operator, nursing assistant, electrical technicians, carpentry, cabinet work, welder, store clerk, utility man, labourer, industrial plastics, and warehouse man.²⁸

The Indian Placement and Relocation Program was as concerned with “social adjustment” factors accompanying employment as it was with employment itself to the point that one could not exist without the other. The idea was that, through the program, Indians would turn into labouring citizens in ways that suited the state, the city and industry. The premise was also that Indians were, without work none of these things to none of these entities. The goal was not exactly to create a working class culture not of its own making, but rather to integrate a class of working Indians into a culture of the department’s imagination.²⁹ It envisioned Native peoples’ place within cities as wage workers only, and its own role as facilitating an individual’s adjustment to a capitalist, industrial, modern society through labour and its associated social aspects. It thus operated to facilitate a certain kind of integration – into an idealized urban working culture.

²⁷ “Speech by Superintendent-General: ‘The Future of the Canadian Indian,’” *The Indian News* 2:2 (May 1956):, 1–2.

²⁸ RG 10, Volume 8473, File 1/23-35, pt. 2, Statistical Report on the Indian Employment Placement Program, “Examples of Employment.”

²⁹ E.P. Thompson, *The Making of the English Working Class* (London: Gollancz, 1963).

Improved levels of education were associated with this type of integration. In this argument, education levels indicated that certain Aboriginal people were now “prepared” to “compete” equally with non-Indians.³⁰ This popular contemporary language is indicative of both the associated goals of enfranchisement and the faith in the open market (“our economy”) in making those goals a reality. Organized along these principals, Indians would surely enfranchise themselves, or at least not challenge being stricken from the Indian registry. Once this happened, they would be nominally equal with the rest of Canadian society. The discourse on employment in this program was one of “bridging” two worlds, of taking one’s “rightful place” and of standing “side-by-side” with non-Indians in a world that was defined as non-Indian.

To those running the program, successful permanent placement meant assimilation and invisibility in the urban community. An emphasis on the possibility of the city indicated a shift in the geographical space where the dominant goal of the department – its own termination – could take place. In the nineteenth century, the segregated reserve was envisioned as an ideal space for the civilization process to take place. By the post-war period, it was cities. However, cities alone would not do the work, and one final angle in justifying the program was to address the fact that there already were some Native people living in cities. “Too many have tried and found it difficult,” one federal booklet suggested,

due to their differences and to prejudice against them on the part of employers, to find suitable employment. Unfortunately there has been a general lack of interest in the Indians on the part of the better class of community residents, with the result that Indians have often found that only in slum areas were they accepted for

³⁰ RG 10, Volume 8414, File 1/21-1, pt. 3, Correspondence Regarding the Placement of Indian Labour, 1955–1956, Memorandum to the Minister: “A Step Towards Integration,” 13 January, 1956.

companionship and living accommodation, and the type of employment offered to them was most unattractive.³¹

In response to this dilemma, the placement program meant to “provide for a more orderly movement to urban centres,” so that the Indians concerned “are equipped to obtain employment and meet the problems of modern day living.”³² “The move from reserve to city presents problems,” argued the department, “particularly because these young people are also moving from one culture to another.”³³

In many ways Native migration was likened to immigration by the Department. Pamphlets such as *Basic Information on Canada* by the Immigration Branch of the Department of Citizenship and Immigration, under which Indian Affairs fell, were distributed to and by officers of the placement program.³⁴ Like the immigrant, one contemporary DIA publication outlined, “the Indian must learn about basic conventions – the need for promptness and regular attendance, employer-employee interviews, trade unions, salary deductions, income tax, unemployment insurance, pension schemes, workman’s compensation, credit resources of non-Indian centres ... [and] learn to adjust to a new society.”³⁵ There was also attention raised to the ongoing need for Indians and employers (the two were always mutually exclusive) to “understand” one another in order to get past their overwhelming differences. The program was one part of an imaginary

³¹ Ibid.

³² Department of Citizenship and Immigration, *The Canadian Indian* (Ottawa: Queen’s Printer, 1964), 14.

³³ Department of Indian Affairs and Northern Development, *The Indian in Transition: The Indian Today* (Ottawa: Queen’s Printer, 1964): 12.

³⁴ RG 10, Volume 8424, File 401/21-2, letter to W.R. Baskerville, director of Immigration, Department of Citizenship and Immigration from H.M. Jones, Director Indian Affairs, 1 October 1958.

³⁵ Indian Affairs and Northern Development, *The Indian in Transition*, 12.

post-war bridge between the “unstructured reserve” and the “demanding environment of the world of work.”³⁶

An Officer, a Candidate and a Case: The Program at Work

The deadline for applications for the job of Placement Officer for the Department of Indian Affairs was 13 September, 1956. According to the job posting, candidates for the position were to be university graduates, preferably with some training in social science, have a number of years’ experience in placement or related work, be familiar with apprenticeship systems, vocational programs and social service work and be capable of preparing and interpreting individual case files. The duties of the placement officers³⁷ were to assist Indians in finding employment by developing employment opportunities and collecting data on training facilities and living accommodations. Responsible to the Indian commissioner or the regional supervisor, they were also to liaise with provincial and federal workers, private agencies, trade unions, educational and training facilities, community organizations and municipal authorities. They were to be possessed of “initiative; good judgment; satisfactory physical condition” and also “personal suitability.” Officers were to be paid in a salary range of \$5,280 to \$6,000 per year and hired according to the “Order of Merit subject to Veterans’ Preference.”³⁸

The first four officers for the program were located in Vancouver, Edmonton,

³⁶ RG 10, Volume 8426, File 401/21-3, pt. 4, “Indian Employment Placement Program.”

³⁷ Because the program distinguished “rural” from “urban” employment placement, it assigned different personnel to each, with “field” officers operating the former and “placement” officers the latter.

³⁸ RG 10, Volume 8413, File 1/21-1 pt. 2, Correspondence Regarding the Placement of Indian Labour, 1954–1955, “Indian Placement Officers.” “Veterans Preference” was an employment measure which favoured veterans. It was a way in which the state rewarded military service after the war by employment in the public service.

Toronto and Winnipeg. They held offices in downtown areas and worked closely with National Employment Service (NES) officers. There were placement officers in eight other regions across the country by 1960 and there were over a dozen in 1964.³⁹ All of the placement officers were men, although in the 1960s, they worked in conjunction with a few “Misses” – unmarried education specialists, social workers, and special placement supervisors. Placement officers were well-paid and integral members of a web of employment services, which included the Indian Affairs social worker and its education department, the National Employment Service, government and private agencies, trade unions and educational facilities, missionaries and other parties interested in helping Aboriginal people “adjust” to cities. Placement officers also kept a roster of landladies of boarding houses willing to house Indians.⁴⁰

Under the Terms of Reference for Placement Officers, their responsibilities included the “selection, preparation, and establishment of Indians who, by virtue of their background and interest, are suited for permanent employment in non-Indian

³⁹ They were located at Vancouver, Whitehorse, Prince George, Fort Smith, Nanaimo, Edmonton, Calgary, Saskatoon (two), Winnipeg (two), The Pas, Regina, Thompson, Port Arthur, North Bay, London, Toronto, Quebec City and Amherst. Indian Affairs and Northern Development, *The Indian in Transition*, 10, and “Some 1,500 Find Jobs: Placement Program Successful,” *The Indian News* (February 1963): 3.

⁴⁰ This would be a very interesting aspect of the program to study. For example, landladies were involved in many of the issues arising in the “social adjustment” realm of the placement experience. Some of the landladies were Native themselves, and noteworthy is the establishment of Indian-run boarding homes such as the Indian-Métis Reception Lodge in Winnipeg, begun by Mr. and Mrs. Stanley and Dorothy McKay, who were, as it turns out, early candidates for the Placement and Relocation Program. For more primary source information on the lodge, the United Church Archives in Winnipeg holds a substantial and organized file on the matter. United Church Archives 509/1/5-1, Conference of Manitoba and Northwest Ontario Conference Home Missions, Indian and Métis Reception Lodge, 1959–1979, Lodge Proposal/Director’s Report/Articles. See also “How Placement Program Helped Couple Find Work,” *The Indian News* 4:2 (May 1960), 1.

communities.”⁴¹ Candidates for the program were not to be relocated unless early placement was likely, and so there was a “very careful” screening process that only accepted candidates with the “requisite qualifications.”⁴² Candidates were ideally single, over the age of sixteen and preferably recent graduates. Consideration was given to “young couples with small families but only when the likelihood of adjustment [wa]s good.”⁴³ The ideal applicant for the Indian Placement and Relocation Program was the single man, however many families and many single Native women, some with children were placed as well. Gender was not a declared factor in the screening process, however there were more men than women in the program, usually by a factor of between two and three to one.

Placement candidates were distinguished from “ordinary welfare relief cases” and those more “suited” to casual employment. The program favoured candidates from southern parts of the provinces, where it was assumed “the higher educational levels, and vocational competency and longer period of association with non-Indian communities”⁴⁴ made them more suitable for permanent urban work. Candidates from other areas were welcome to apply, but they would usually require “academic upgrading and social orientation followed by vocational courses or on-the-job training to prepare them for employment.”⁴⁵ Candidates were above all chosen for possessing “the following; the

⁴¹ RG 10, Volume 8427, File 501/21-3 Terms of Reference for Placement Officers and Field Officers in Economic Development.

⁴² RG 10, Volume 8427, File 501/21-3, letter to Indian Affairs Branch from R.D. Ragan, Regional Supervisor of Indian Agencies, 1 Dec, 1958, re: Voucher #420 Placement Assistance.

⁴³ RG 10, Volume 8424, File 401/21-2, letter to the Secretary, Treasury Board, from Laval Fortier, 5 August, 1958.

⁴⁴ RG 10, Volume 8426, File 401/21-3, pt. 4, “Indian Employment Placement Program.”

⁴⁵ Indian Affairs and Northern Development, *The Indian In Transition*, 11.

necessary motivation, the ability to grasp what is required on the job and in the community, work skills or the potential to develop these, and the stability necessary to cope with the pressures and anxieties involved in working and living in the new environment.”⁴⁶

Placement officers left narrative and statistical data about candidates in the form of case files.⁴⁷ These are characterized by a number of forms containing questions about the individual, their background and their experience of urban placement. The original IA 3-121, or the Placement Information Record, was the central form used by placement officers and reads somewhat like a mix between a resume, a medical file, a loan application, and an elementary school report card. It included information about the applicant’s name, band, band number and address, date of birth, sex, height, weight, marital status, religion and next of kin. It asked if the applicant was willing to leave the reserve for permanent employment, and asked for a list of dependants prepared and not prepared to leave the reserve with the applicant. It asked about the number of years completed at school, the command of English and French, the type of school attended (Indian Day School, Public School, Indian Residential School or Other), and about Vocational School or Special Training obtained and what training, if any, would be suitable for the candidate. It asked about their hobbies, leisure time activities and involvement in organizations. It also required the applicant’s employment history covering the last twelve months. If the applicant was self-employed, the form asked the nature of work, approximate earnings and the reasons for wishing to change. It also asked for names and addresses of references.

⁴⁶ RG 10, Volume 8426, File 401/21-3, pt. 4, “Indian Employment Placement Program.”

⁴⁷ These files are archived by region and date rather than by candidate.

These forms were sometimes accompanied by a Superintendent's Report of the Placement Information Record. This assessed the applicant based on knowledge of the individual and personal interviews. It also asked about family and band support of the "plan," previous experience living away from the reserve, social problems that would have bearing on the placement, and "other social problems." It also asked about ability, personality, habits and character, and for an estimate of the applicant's ability to adjust satisfactorily or otherwise to the new environment contemplated. It asked about physical condition based on recent medical examination and x-ray and about the plan for relocation and the expectations of the applicant and their family.

We can qualify the IA 3-121 forms as "case files," defined as "records generated by political, social, legal, and other institutions entrusted with the task of categorizing and assessing certain populations, usually for the purpose of supervising, treating, punishing, servicing, and/or reforming individuals or groups deemed in some way deviants or victims."⁴⁸ While the files are indicative of the qualitative attributes considered best suited to urban life and how they were measured, there are limits to the amount of information one can glean from these particular files regarding the truth about or agency of Aboriginal people. This is because much of the forms were actually left blank, or given one or two word appraisals. We must assume that either much of the decision-making was done according to the placement officer's sense of an individual applicant or that these questions did not really matter once an individual had chosen to take part in the program. Much more seems to be put into evaluative notes regarding "social adjustment"

⁴⁸ Franca Iacovetta and Wendy Mitchinson, "Social History and Case Files Research," in Franca Iacovetta and Wendy Mitchinson, eds., *On the Case: Explorations in Social History* (Toronto: University of Toronto Press, 1998), 3.

after relocation and in formal correspondence between placement officers, regional supervisors and Indian Affairs headquarters about “problem cases.” These are filled with comments like “although ... exceptionally neat, clean and presentable ... proved unsatisfactory”; “needs some encouragement,” “could speak well ... [but] not too anxious to work and care for her child,” “could be lonely” and “will only be a source of trouble if located in Winnipeg.”⁴⁹

Candidates were not chosen unless they had a good chance of getting permanent placement, ideally within a month, as the department wanted to keep the costs of the program to a minimum. Indeed, a substantial bulk of placement files were IA 8-30 forms (Reports of Monthly Expenditure) and accounts of funds borrowed and repaid. Grants were meant to be repaid and the practice was to “estimate carefully with the candidate the costs of re-location, and to provide assistance which may be necessary to supplement the candidate’s best efforts on his own behalf. Accurate records of all costs are kept and presented to the candidate following placement and initial adjustment. The Placement Officer then worked out with the candidate a reasonable arrangement for repayment in keeping with the individual’s circumstances.”⁵⁰ While this program appears open and predictable, in fact, judging from the pile of correspondence, it was not at all. For example, candidates did not know for sure how much or how little they would be able to borrow.

⁴⁹ RG 10, Indian Affairs, Volume 8421, 501/21-1, pt. 2, Manitoba Region – General Correspondence Regarding Placement of Indian Labour, 1957–1959, Placement Files.

⁵⁰ RG 10, Volume 8424, File 401/21-2, letter to the Secretary, Treasury Board, from Laval Fortier, 5 August, 1958, Appendix A “Assistance Under the Urban Placement Program.”

Assistance provided through the program originally included transportation, accommodation, a subsistence allowance pending receipt of wages, an allowance for clothing and uniforms and funding for tuition and supplies.⁵¹ One year into the program, however, the Indian Affairs Branch requested more funding for furniture and household effects so that placement candidates would not seek shelter in less desirable sections of town to avoid high rent.⁵² Furnishings were bought through Eaton's, where the department had a 10 percent discount. The program also facilitated the purchase of houses and furnishings. The program was based on a loose policy of minimal loans for "basic items ... essential to establishing a family in suitable housing." Loans were drawn up based on placement records. The Placement officer also drew up an expenditure, repayment and counseling plan based on the wages of the placement candidate.⁵³ Ironically, one author looking at a similar labour program in the US concluded that such programs expanded rather than eliminated the relationship between the government and

⁵¹ Costs included "transportation to the centre of employment, and meals and accommodation on route where necessary; room and board, or alternatively house rental, services, and food costs, at prevailing rates for the area, which will normally be for a period of less than two months; personal allowances of \$15 per month for individuals, or \$25 per month for families, normally for a period of two months or less; Clothing where necessary, normally amounting to \$100 or less; Assistance in purchasing furniture and household effects normally amounting to \$250 or less; Provision of tools where necessary to affect placement, normally amounting to \$150 or less; On-the-job training contracts with employers on behalf of placement candidates, where required for permanent placement on a pre-apprenticeship or trade training basis; normally for a period of six months but in any case not to exceed one year." RG 10, Volume 8424, File 401/21-2, letter to the Secretary, Treasury Board, from Laval Fortier, 5 August, 1958 and Monthly Report of Expenditures of the Indian Employment and Placement Program recorded Room and Board, Personal Allowance, Clothes, On-The-Job Training, Miscellaneous (tools etc.), Total and Repayments.

⁵² RG 10, Volume 8424, File 401/21-2, letter to the Secretary, Treasury Board, from Laval Fortier, 5 August, 1958, Appendix A "Assistance Under the Urban Placement Program."

⁵³ RG 10, Volume 8426, File 401/21-3 pt. 4, letter to Regional Supervisor, North Bay from Chief, Economic Development Division R.F. Battle, 19 Dec, 1961.

the Indian, bringing the state into the fields of public housing, adult education programs and urban Indian centres, each of which contributed in part to the growth of self-determination movements.⁵⁴ However, Lien Notes for the placement program underscored that until assistance was repaid, all “chattels”⁵⁵ actually belonged to Her Majesty the Queen in right of Canada, and if misused, could be expropriated by the department, its officers, agents or employees.⁵⁶ It was to be stressed to Eaton’s, though, that the purchases were made by the individual and not guaranteed by the department, and in at least one instance the whole purchasing and repayment plan involved not only the family and the placement officer but also the store manager.⁵⁷

Native people who took part in the program were considered able to access rights and services as Indians until they were employed. Thereafter, they would be officially ineligible for federal services and claims on the state. For example, there was a general policy on dental work that was approved in 1963 in which Indian and Northern Health Services provided dental care for those cases “where the facial appearance of the candidate is a critical factor in placement.” Those who worked in fields as mechanics, plumbing and welding were ineligible, along with those who had already been placed. For them, placement staff was to arrange for care by “referring the individual to private dentist facilities which would be available to him on a repayable basis from the returns of

⁵⁴ MacKay, “Warrior into Welder,” 179.

⁵⁵ “Chattels” in these files normally consisted of bedroom suites, kitchen suites, refrigerators, electric ranges, chairs and other miscellaneous items.

⁵⁶ RG 10, Volume 8426, File 401/21-3, pt. 5, Ontario Regional Headquarters – Relocation of Indians for Employment, 1963–1965, Lien Note.

⁵⁷ RG 10, Volume 8426, File 401/21-3, pt. 4, letter to Indian Affairs Branch from Regional Supervisor, North Bay, 27 December 1961.

his employment without reference to government assistance.”⁵⁸ At the same time, in at least one instance clarification was requested of the Economic Development division regarding the payment of provincial sales tax on expenditures related to establishment off-reserve. Chief of the division, R.F. Battle, confirmed that “the individual is responsible to pay provincial sales tax on articles purchased, particularly as he is a resident of the non-Indian community.”⁵⁹

Coinciding with this shift towards increased access to relocation funds, there was a change in the IA 3-121 form, which included a new section on Property and Personal Effects owned by applicant. It asked about financial obligations to the branch, the band and “other,” and about what assets were available in establishing the applicant from their own resources, or those of the family, the band and “other.” It outlined the cost of the plan. It also included sections on whether the individual was “genuinely interested in finding employment,” any experience living away from the reserve, and any social or other problems. It asked for a general appraisal of the individual and/or family with detailed information about ability, personality, habits and character.

It is significant that the forms also asked whether the candidate had the support of the family, and for the attitude of the band council to this program of urban placement in respect to the applicant. The question indicates that the department was aware of resistance to the program. This resistance only inspired increased surveillance and screening of relocating Indians. One memorandum on the topic noted the “reluctance on the part of [some] young people to leave the shelter of the reserves” and observed that

⁵⁸ RG 10, Volume 8427, File 501/21-3, letter to Regional Supervisor, Manitoba, from Jules D’Astous, Chief, Economic Development Division, 24 July, 1963.

⁵⁹ RG 10, Volume 8426, File 401/21-3 pt. 4, letter to Regional Supervisor, North Bay from Chief, Economic Development Division R.F. Battle, 19 Dec, 1961.

“[t]his attitude is supported by the parents and grandparents.” This reluctance was understood as influenced by “reports they receive on the moral degradation of some of those who have left reserves to work in cities” and justified the close surveillance offered by this new placement and relocation program, which not only aimed to place people in suitable employment and assist them in securing accommodation”⁶⁰ but also endeavoured to facilitate “adult education on the reserves pertaining to life in non-Indian communities.” It is significant that in a memorandum of the department, a comment by Mr. Steinhauer (an Indian from the Saddle Lake Band in Alberta) made at the Canadian Conference of Social Work was repeated:

Not only should this public relations program direct its attention to those specifically wishing to leave, but to all Indians in order that they may feel they fully understand that this program is to help Indians who wish to leave the reserves and is not a program designed ‘to take Indians away’ from reserves. The support and understanding of other members of the reserve, particularly parents and grandparents of those young people, will be essential, otherwise there will be a continual stream of letters urging the young people to return.⁶¹

In spite of the large pile of awkward and disturbing records, the Indian Placement and Relocation Program was not a highly centralized program run through uniform policy initiatives, and while recorded by standardized (but mostly blank) forms, the program took shape differently in different regions.⁶² It holds virtually no currency in either

⁶⁰ RG 10, Volume 8414, File 1/21-1, pt. 3, Memorandum to the Minister: “A Step Towards Integration,” 13 January, 1956.

⁶¹ RG 10, Volume 8413, File 1/21-1 pt. 2, Memorandum to “E” Re: Indian Placements Program.

⁶² In some areas, on-the-job training was particularly popular, in Edmonton and London, placement services were soon covered by municipal Family Services Bureaux through contracts with the Department (25 % of placement funds in the Alberta region went to the Family Services Association of Edmonton in 1965-66), and in Saskatchewan, the program rapidly became as much about accessing urban housing as it was about employment. Terrance Pelletier, “Cowesses First Nation, the Town of Broadview, and the City of Regina: A Study of Historical Relationships, 1870–1995,” paper presented at

Aboriginal or labour history, partly because its influence was relatively brief and highly individualized, and also because it was a special program related to the much larger National Employment Service, catered to a relatively small and specific labour market, was available to status Indians only and was superseded by several larger federal and provincial employment initiatives in the late 1960s and 1970s.⁶³

And indeed, despite all of the records the Placement Program left behind, the department's annual reports show that relatively few were actually placed. In Manitoba in the first year of the program, thirty-one people were accepted for placement, thirteen were placed and working, nine were in training and nine "failed to develop."⁶⁴ The main reason for low numbers, in the words of the department, was that "the emphasis in this program continues to be placed on careful selection rather than on large numbers of placements."⁶⁵ The Department argued that the program would be spun "to employers and the community on the basis of quality rather than to undertake relocation of large numbers."⁶⁶ Until the late 1960s, these numbers remained low nation-wide (there were 591 placement candidates in all of Canada in 1965) despite the increasing numbers of

the 2006 Canadian Historical Association Annual Meeting, 20 May 2006. Pelletier points out that urban homes were attractive because homes with running water and electricity were not readily accessible on reserves by the mid-1960s.

⁶³ For more information on later employment programs, see Employment and Immigration Canada, *The Development of an Employment Policy for Indian, Inuit and Metis People* (Ottawa: Employment and Immigration Canada, 1978), Impact Research, *Native People and Employment in the Public Service of Canada* (Ottawa: Office of Native Employment, Public Service Commission, 1976), Stewart J. Clatworthy, *The Effects of Education on Native Behaviour in the Urban Labour Market* (Ottawa: Labour Market Development Task Force, 1981), and Canada Employment and Immigration Advisory Council, *Employment Services to natives* (Ottawa: The Council, 1982).

⁶⁴ *Department of Citizenship and Immigration Report of the Indian Affairs Branch for the Fiscal Year Ended March 31, 1959* (Ottawa: Queen's Printer, 1959), 77.

⁶⁵ *Department of Citizenship and Immigration Report of the Indian Affairs Branch for the Fiscal Year Ended March 31, 1960* (Ottawa: Queen's Printer, 1960), 47.

⁶⁶ RG 10, Volume 8426, File 401/21-3, pt. 4, "Indian Employment Placement Program."

Aboriginal people moving to the cities. We can assume that most people managed to avoid placement officers and their crews and found jobs on their own, through family and community connections or directly through the NES. Reports, for example, that the “teenage Indian no longer comes to Toronto on speculation hoping to find a job. He comes as part of a group to start a carefully planned program of study and job training,”⁶⁷ were highly exaggerated.

However small it was, the program provides some insights into the labour operations of the Welfare and Training and Economic Development branch of Indian Affairs, the contemporary understandings of Indian labour and the urban management angle of the overall policy of integration. Moreover, the Program did take its place in Canadian popular culture, as demonstrated in an award-winning 1966 episode of the CBC drama series *Wojeck*, entitled “The Last Man in the World.” The episode focused on the experiences of Joe Smith, a Native man played by Ojibway actor and broadcaster Johnny Yesno, who arrived in Toronto from Moosonee. When Joe goes to the National Employment Service, he is sent to a “Special Counsellor” of the “Indian Urbanization Program,” even though, as he says, “I just want a job.” The “Special Counsellor” explains, “What we’re trying to do, Mr. Smith, in this Indian urbanization, is consolidate two cultures, yours and ours. Now, to establish you firmly in the framework of the integrated society, we’re going to have to give you a series of tests.”⁶⁸ He continues, “now, in the first test, Mr. Smith, all we will determine is how fast your brain responds to

⁶⁷ RG 10, Volume 8426, File 401/21-3, pt. 4, “Help Young Indians to Fit into City Life,” *Globe and Mail*, April 1 1961.

⁶⁸ Other tests used by the NES include the “Kuder Interest Test,” the “Test of Learning Capacity,” the “Dominion Vocabulary Test,” and the “Dominion Group Test of Learning Capacity.”

neural stimuli. Now, on the board, there is this plaque with a series of holes in it. Now, there are pegs to fit into these holes: square peg in a square hole, round peg in a round hole.” Joe asks, “What happens if I put a round peg in a square hole?” To which the counsellor responds, “Well, it just wouldn’t fit, would it, Mr. Smith?” Joe then leaves the office – without a job.⁶⁹ This is the initial phase in a downward trajectory, recounted in part two of the program, which includes being refused liquor at a bar by a white waiter (“go down the street”/ “you’re in the wrong place”), being stopped by police for being in an alley, getting hit by a car while crossing the street (“go back to the reservation!”), getting offered whiskey by his white girlfriend, who later dumps him, getting arrested in a barroom brawl (“chief, your squaws are pretty good”) and finally committing suicide in a jail by hanging himself with a belt. The belt, both real and metaphorical, is what prompts coroner Wojeck’s investigation.

My own reading of this episode is that it was both an early representation and a critique of urban racial prejudice in Canada and a welcome relief from other films of the era depicting urban relocation.⁷⁰ Joe’s experience of urban life was, however, what mainstream society generally painted as the struggle faced by Aboriginal people when confronting modernity. What distinguished it was that it dealt to a limited extent with both urban spatial geographies of race, gender, sexuality and class mostly from the point of view of non-Native waiters, girlfriends, placement officers, police and coroners.

⁶⁹ Canadian Broadcasting Corporation, *Wojeck*, “The Last Man in the World,” Dir: Ron Kelly, 1966.

⁷⁰ Examples of these films include the National Film Board of Canada’s *The Transition* (1964), *High Steel* (1965), *Charley Squash goes to Town* (1969), *Because they are Different* (1964), *No Longer Vanishing* (1955) and *The Longer Trail* (1956). *No Longer Vanishing* and *The Longer Trail* were shown on the first day at the Training Course for Indian Placement Officers. RG 10, Volume 8427, File 901/21-3, “One Week’s Training Course in Ottawa for Indian Placement Officers.”

Gender indeed influenced the experience and image of Native people in urban areas, and the story would have been told much differently if Joe were a woman. About half as many women as men were placed in this program, however, at particular times the numbers of women were closer to equal with those of men.⁷¹ The ratio is called into question, though, as those in the program continued to move, change jobs and look for other opportunities. What is remarkable is a pronounced concern for Native women, and in the following section I will look more closely at the ways they were talked about.

Narratives of Native Women and Urban Placement

In the last twenty years, several historians have analyzed how women in urban areas circulated within narratives of transgression. This scholarship focuses on the turn-of-the-century city (most notably, London, England, Toronto, Vancouver, and New York City), and femininity, sexuality, respectability, race, space, social control and industrial development as cues in the narratives. Authors have outlined how ideological and social circumstances of modern cities were explained through particular rhetorical structures.⁷² However criticized for their inattention to the facts of poverty and dislocation, it is worthwhile to note the longevity of those narratives,⁷³ their explanatory power and their

⁷¹ For example, in the October 1, 1957 to March 31, 1958 report for Manitoba, seven men and six women were placed. Two-thirds of the women were single and half had children.

⁷² See, for example, Judith Walkowitz, *City of Dreadful Delight: Narratives of Sexual Danger in Late-Victorian London* (Chicago: University of Chicago Press, 1992), Carolyn Strange, *Toronto's Girl Problem: The Perils and Pleasures of the City 1880–1930* (Toronto: University of Toronto Press, 1995), Kathy Peiss, *Cheap Amusements: Working Women and Leisure in Turn-of-the-Century New York* (Philadelphia: temple University Press, 1986), and Kay Anderson, *Vancouver's Chinatown: Racial Discourse in Canada, 1875-1980* (Montreal: McGill-Queen's University Press, 1991).

⁷³ A more recent reincarnation of Native narratives of sexualized and racialized danger takes on the combined experiences of racism, patriarchy and poverty as its premise,

influence in the characterizations of the ‘truths’ about gender and race in the restrictive and punitive geographies of white settler societies.⁷⁴

In the mid-twentieth century, at least two narratives circulated about Native women and urban labour. The first depicted Native women as particularly vulnerable to disrespectful influences in cities. This narrative was built most commonly around loneliness, living arrangements and leisure activities. It was feared that they were especially “little ... prepared for the city and how quick others are to take advantage of them.”⁷⁵

Placement officers for their part were noticeably anxious about women in the placement program and monitored them closely. A case in which two “girls” from another region appeared at the Toronto Placement Office in 1962 illustrates this concern. The girls caused an enormous stir and set off a chain of events that included several accusations of illicit behaviour, and then long sermons on the vicissitudes of life in the big city and the ignorance and destitution of Indian girls. One of the more serious problems in this particular case was that they had appeared without prior notice from the placement officer of “their own” region. Once the smoke had lifted, the placement officer from their region wrote the only really passionate letter I found in the files (most of the correspondence was irksomely indifferent): “In reviewing the incident I cannot

rather than cultural loss. Missing women in a way have become representative of an Aboriginal experience of combined patriarchy and racism, and been claimed by Aboriginal media as Aboriginal and women, rather than distinctively urban.

⁷⁴ Sherene H. Razack, “Gendered Racial Violence and Spatialized Justice: The Murder of Pamela George,” in Sherene H. Razack ed., *Race, Space and the Law: Unmapping A White Settler Society* (Toronto: Between the Lines, 2002), 121-156.

⁷⁵ United Church Archives, 509/2/1-4 no. 7, G. McMillan, Social And Economic Research 1947-1959. G. M. Grieve, *Report on Indian Work*, Winnipeg, Manitoba, Jan 1957–Aug 1957.

help but think that my [colleagues?]... pressed the panic button a trifle early,” he wrote. “These girls on their own wanted to go to Toronto with Indian friends. ... These girls were told by our Superintendent and our Placement Officer to seek advice and guidance from the Regional office only if in need, on the same basis as one would seek out an Embassy Office if in trouble in a foreign country. The fact that the girls tried to find employment on their own ought to have been sufficient evidence to Toronto Regional Office that they were not referred to them by us.” Moreover, he explained, one of the girls “was born in the Town of Edmondston, lived all her life there and finished school in the City of Sydney.” The other “spent a number of years in Boston (leaving there when about 15 years of age).” In short, he argued, “I don’t feel that the Big City of Toronto will throw them completely.”⁷⁶

About a year later, more correspondence appears regarding the same two young women. This was fuelled by reports from their landlady concerning their conduct, which included being “involved with men in their apartment,” having “obviously been drinking,” being “very scantily clad,” joining men in a car and not reappearing until the following day” and receiving telephone calls throughout the night from all sorts of men asking for “girls.” The situation subsequently escalated into a full-blown crisis involving social workers, psychiatrists, and their parents. It was, notably, not the young women’s working habits that concerned the officers (one was a clerk typist for the province), but rather their “social adjustment.” Taking on “social adjustment” instead of simply labour placement as a concern of urban relocation, the department opened up for itself a wide

⁷⁶ RG 10, Volume 8426, File 401/21-3, pt. 4, letter to Indian Affairs Branch, from McKinnon, 18 July, 1962.

field of surveillance and regulation of Indian women's social lives, free time, living arrangements and mobility.

While the department tellingly insisted that Indians were “free, of course, to move at any time,” it was preferred that *all* arrangements were made prior to their arrival in cities.⁷⁷ This was not a purely bureaucratic concern: the department and those concerned with urban Indian issues were also attentive to social and racial segregation. Mrs. Oddson, a social worker for the department noted that “[t]he Dept. of Indian Affairs does not encourage girls to come to Winnipeg to work because there is no place for them to stay. They are not accepted in the better districts.” Miss Oddson felt that if the girls lived in a home under church auspices, they might be more readily accepted.⁷⁸ Indeed, the living arrangements of Native people was one of the most discussed issues with regard to relocation for work. Branches of several organizations including the YWCA, the Sanatorium Board, the Salvation Army, the Roman Catholics, the Presbyterians, the United Church and others became involved by building reception and boarding homes open to Indian women and men.

The discourse on Aboriginal women and urban work focused less on their capacity to negotiate modern life and more on their association with the so-called “foreign element” – white men.⁷⁹ Familiar late nineteenth-century fears of “white slavery” and early twentieth-century fears of “promiscuity” (including mixed race

⁷⁷ RG 10, Volume 8426, File 401/21-3, pt. 5, letter to Mr. Bannah, from R.H. Biddle, Placement Officer, 22 May, 1963.

⁷⁸ Oddson was responding to a popular liberal middle-class sentiment that boarding homes for Indians would tend to segregate them from the rest of the urban population.

⁷⁹ It was feared that girls especially were “little ... prepared for the city and how quick others are to take advantage of them.” United Church Archives, 509/2/1-4 no. 7 G. McMillan, Social And Economic Research 1947-1959. G. M. Grieve, *Report on Indian Work*, Winnipeg Manitoba Jan 1957–Aug 1957.

relationships) rang forward through the mid-twentieth century. So too did the accompanying need for moral and social regulation. In discussions of Native women, the telephone, the alleyway, the curfew and the car were signals of some sort of perilous situation. Needless to say, many of the women in the placement program changed their living arrangements quite often.

Another, and quite strikingly different, narrative of Aboriginal women's urban work dominated the media coverage of the placement program. This version was a celebratory tale of courageous, patient women who were "coming to the fore," and the proof was that they were "earning their own living." Native women were in demand and they were being "accepted" everywhere. In fact, their presence throughout urban areas in Canada symbolized the possibility of integration and equality. "She is a Labour Representative [for the "hello girls" of the Bell Telephone Company in Montreal]..." "She Has Her Own Business [a restaurant on the Walpole Island Reserve] ..."; "She is a Bank Cashier [at the Royal Bank branch office in Sturgeon Falls]..."; "She is a stenographer with the Territorial Government"; ... "[She] is an efficient and well-liked supermarket cashier..."; [She] works in the Montagnais Hotel at Schefferville in Northern Quebec...."⁸⁰ According to Superintendent of Education for the Indian Affairs Branch Howard Rodine, "[d]iscrimination against the Indians [in the placement program]... has not been a problem... In fact evidence of any kind of segregation has been remote... Indian girls, some of whom are strikingly pretty, are very popular with white boys. There has been no trouble arising from social life between the two groups."⁸¹

⁸⁰ "Indian Women of Today," *The Indian News* 4:3 (December 1960): 1.

⁸¹ RG 10, Volume 8426, File 401/21-3, pt. 4, Virginia Etherington, "Help Young Indians to Fit Into City Life," *Globe and Mail*, April 1961.

A Native woman in the city was (always patiently and courageously) “making her own way,” and conquering loneliness, usually in a silent and timid manner.

In this particular narrative, middle-class respectability is presented as something Native women could work towards, but also something that they were always and already outside of. Together, the two narratives indicate that Native women’s labour was never simply about work, it was also about modernity and the state, about how Native women would negotiate the first with the assistance of the second. Together, they also demonstrate that many Canadians saw the mid-twentieth century as a moment of possibility for women, for Native people and for the nation. While neither narrative can really claim to represent anything except social anxiety, in the end, it is significant that they exceed and cancel out each other.

The Hairdressers

After business college programs leading to secretarial work, one of the more popular options for Aboriginal women in the Placement and Relocation program was hairdressing school. Throughout Canada, many women went through the Marvel School, as well as local technical institutes and beauty schools. The DIA estimated that it would cost about \$400 for each student, including tuition and tools for training that lasted seven months on average. This required a relatively brief and inexpensive commitment on the part of the DIA and the student, compared to other programs. The educational requirements for most programs was grade 10, but again, it was relatively flexible. After obtaining certification, hairdressers often immediately found positions working in city

salons run by non-Aboriginal women, washing, cutting and styling the hair of mostly non-Aboriginal clients.

Louise McGillvary's story of placement was told in the *Indian News*. Six years after she left Prince Albert Residential School as a student (where she also worked), Louise's mom told her to get advice from the Indian agent regarding her interest in hairdressing. He in turn made the arrangements for her to enter a hairdressing course at Manitoba Technical Institute in 1957. At the end of her eight-month hairdressing course, she was interviewed by a placement officer. The officer told her about an opening at Dema's Beauty Parlour in Portage La Prairie which had come through the National Employment Service. The placement officer went with Louise to Portage La Prairie, where she was interviewed by the NES. Then she went to Dema's Beauty Parlour to meet the proprietor, where she was accepted.⁸² She was also placed in a "good home for board and room" with an "elderly couple who are taking an interest."⁸³ She worked at Dema's for nine months, and then was released. She went home for a week, and then went back to the NES, where she was referred to another employer and hired. Like many hairdressers, she hoped to one day open her own beauty salon.⁸⁴

While the ideology of integration defined the Indian placement program, these parameters coexisted with the personal pursuit of employment – for some, in the highly-specialized, matriarchal, and 'professionalizing' urban post-war beauty industry. There is a debate within the history of beauty culture in America over whether the beauty industry has subjugated women or empowered them. The most interesting aspects of this debate

⁸² RG 10, Volume 8421, 501/21-1 pt. 2, Placement Forms.

⁸³ Ibid.

⁸⁴ *The Indian News* (May 1960), 4.

for me are engaged in by scholars of African American history, who have been able to demonstrate that the segregation of the beauty industry by race has actually served to nurture African-American economic and occupational independence and the formation of authentic black identities, and enabled women to engage significantly in black political movements in the twentieth century in the United States.⁸⁵

Any argument for resistance or agency among Aboriginal workers must be understood within the context of colonial regulation by the Department of Indian Affairs, churches and social service agencies, and society's ultimate goal that Aboriginal people would disappear as Aboriginal. Moreover, as Philip Deloria points out in his work on Native Americans and modernity, society does not associate Native women with consumption, modernity, beauty, technology, labour⁸⁶ or, as others have argued, even womanhood for that matter.⁸⁷

Integration and Class

The American literature on race and the beauty industry draws out a few other important differences for Aboriginal hairdressers. First, in the 1950s and 1960s in Canada,

⁸⁵ Julie A. Willet, *Permanent Waves: The Making of the American Beauty Shop* (New York: New York University Press, 2000), Julia Kirk Blackwelder, *Styling Jim Crow; African American Beauty Training during Segregation* (College Station: Texas A and M University Press, 2003), Kathy Peiss, *Hope In A Jar: The Making of America's Beauty Culture* (New York: Metropolitan Books, 1998), and Tiffany M. Gill, "Civic Beauty: Beauty Culturists and the Politics of African American Female Entrepreneurship, 1900–1965," *Enterprise and Society* 5:4 (2004), 583–593.

⁸⁶ Philip J. Deloria, *Indians in Unexpected Places* (Lawrence: University of Kansas Press, 2004), 7.

⁸⁷ Adele Perry, "Fair Ones of a Purer Caste: White Women and Colonialism in Nineteenth-Century British Columbia," *Feminist Studies* 23:3 (Fall 1997) and Sarah Carter, "Categories and Terrains of Exclusion: Constructing the 'Indian Woman' in the Early Settlement Era in Western Canada," *Great Plains Quarterly* 13:3 (Summer 1993), 147–61.

hairdressing schools were never officially segregated by race, as they were in the US and in fact the goal of integration was what underscored departmental financial and philosophical support for Aboriginal women's salon training. For example, a photograph of the 1961 graduating class at Olga's Beauty Salon in Penticton, BC, featured three Okanagan women, Rose Marie Baptiste, Pauline Gregoire and Patsy Eli. According to the *Indian News*, Pauline "set the standard."⁸⁸ In Maria Campbell's 1960s hairdressing course in Edmonton, there was "a Black girl, a Japanese [girl] and a Blackfoot woman" as well as herself, a Métis. She recalls, "the majority of the students were young white poor and uneducated women from farms and small towns."⁸⁹

In hairdressing, unlike in nursing, race and class were not significant barriers to training, nor did they determine where, ultimately, one could obtain a job. Of the women who trained as hairdressers in Winnipeg as part of the Placement Program, for example a significant number were placed in salons in the middle-class neighbourhoods like River Heights, including the Magic Mirror Beauty Salon, Bloomquist's River Heights Salon, Hilde's Beauty Salon, the American House of Beauty, Charmette Beauty Salon and Virginia's Beauty Clinic.⁹⁰ This could indicate a pattern of integration by residence that might be similar in some ways to Auckland, New Zealand's scheme of relocating Maori families amongst middle-class urban whites in order to speed up and encourage successful assimilation.

Most of the women entering training were in their late teens and early twenties and most were single. Although they could access training, the reward was a very low-

⁸⁸ "Okanagan Girl Leads Class," *The Indian News* (April 1961), p. 4.

⁸⁹ Maria Campbell, Personal Communication, 26 April, 2006.

⁹⁰ RG 10, Volume 8427, File 501/21-3, Placement Forms.

paid job: a placement candidate who was a hairdresser in Winnipeg in 1961 earned \$40 per week.⁹¹ In a survey of placement candidates in Toronto, the hairdresser, age 17, was the second to youngest of the group. She had spent 2.5 years in the program, and had changed employers three times, not that many in the context, and she had lived at five boarding homes, which is not especially remarkable given her changes in employment. She was hired through the National Employment Service. She earned \$35 per week when she started in the Placement and Relocation Program, and when the survey was completed, she earned \$40. This tied with apprentice metal mechanic for the lowest earnings.⁹² According to Maria Campbell, the allure and excitement of hairdressing school, particularly for “a young woman from the bush” did not quite measure up to the promise of “great jobs and great pay.” Hairdressers, she explains, were all “exploited women, but they thought they were better because they were into beauty.” After only a brief time working as a hairdresser, Campbell took a waitressing job, finding it more lucrative and enjoyable.⁹³ Many other trained hairdressers also took work as clerks, waitresses, and at factories and other businesses.

Entrepreneurship and Loans

According to the 1961 census of Canada statistics on female workers, only 16.2 per cent of those in the labour subcategory “barbers, Hairdressers and Manicurists” earned less than \$500 annually, the salary paid to women who were placed as hairdressers in the

⁹¹ RG 10, Volume 8427, File 501/21-3, Permanent Placements March 1961.

⁹² RG 10 Volume 8426, File 401/21-3, pt. 4, Memorandum to Indian Affairs Branch from Regional Supervisor Toronto, Re: Evaluation – Employment Placement Program, 6 April, 1961, Appendix “B.”

⁹³ Maria Campbell, Personal Correspondence, 26 April, 2006 and *Halfbreed* (Toronto: McClelland and Stewart, 1977), 132–135.

program. Nearly 40 percent of the workforce, the largest earning category, made \$2000 or more.⁹⁴ This probably accounts for the fact that very few Native women started up their own salons.

Unlike the experience of African American women in the US, or even in Canada,⁹⁵ racial discrimination in the service industry did not stimulate Native entrepreneurship. Like African Americans and some post-war immigrant communities in the US and Canada, Aboriginal entrepreneurs faced debilitating discrimination when applying for loans to set up family-owned businesses. What sets Native hairdressers apart was that they did not have the personal or community resources to fall back on. The success of entrepreneurs like Viola Desmond's family, described in Constance Backhouse's book *Colour-Coded*, relied upon a Black clientele barred by bigoted barbers and beauticians.⁹⁶ An urban Native clientele could not sustain the business in the same way, nor did families or communities have previous experience and capital to share. The

⁹⁴ Department of Labour of Canada, *Women at Work in Canada: A Fact Book on the Female Labour Force* (Ottawa: Queen's Printer, 1964), 66. The Yukon and Northwest Territories were excluded from these statistics. The differences were also accounted for by part-time work (which was not within the parameters of the placement and relocation program) and the inclusion of room and board as part of wages (which was unlikely in hairdressing).

⁹⁵ Constance Backhouse, *Colour-Coded: A Legal History of Racism in Canada, 1900–1950* (Toronto: University of Toronto Press, 1999), 226-271.

⁹⁶ Viola Desmond's paternal grandfather was a hairdresser in Halifax's North End. Barbering was means of carving out a successful living in the late-nineteenth century and early twentieth century because of segregation by race in many portions of the country. Viola went to mixed elementary and high schools, then taught at segregated schools for Black students. She saved her money, and knew from the outset that she wanted to set up a hairdressing business of her own. For Viola, training facilities in Halifax were closed to Black women and the 1930s, and she traveled to Montreal, where she was able to enrol. Then she trained in New York, and Atlantic City. Backhouse, *Colour-Coded*, 226-271. See also Julie Willett, "'Hands Across the Table': A Short History of the Manicurist in the Twentieth Century," *Journal of Women's History* 17:3 (2005), 59-80.

Aboriginal women who were placed through the program were certainly not in a position to own shops – the program was designed to create workers, not owners.

The women who did own shops had to either use their own resources to buy the necessary equipment for a beauty shop or negotiate with the Department of Indian Affairs for loans, a process that required the department's unqualified intervention in their business ventures. Moreover, it appears that none of them took part in the Placement Program. The experience of Linda Maloney, who trained as a hairdresser in the early 1960s, is instructive in this regard. After working at various beauty salons in Nova Scotia, she opened her first business with money she had earned herself. However, to expand, she needed more. She approached banks in Truro, but said, "When they find you are an Indian, forget it." She then approached a finance company. Here, she could only get the loan, she said, "if I would pay off a loan owed by another Indian whom I did not even know." She did this, and kept building. When she decided to move again, wanting a more fashionable salon, she "tried to borrow money from the Bank of Montreal," but "they would not hear of it because I was an Indian." The Department of Indian Affairs had to agree to guarantee her loan under the Economic Development Fund, and only with this assurance did she get her loan from the CIBC.⁹⁷ Those Aboriginal people who wished to be entrepreneurs had to work with Indian Affairs to guarantee loans, requiring their approval and involvement in their business ventures.

Two Aboriginal servicewomen, Edith Gordon and Mary Ann Mirasty, took up the army's offer of hairdressing courses when they were discharged. Edith would have preferred to go into civilian policing, but that job that was not open to women at the time.

⁹⁷ Indian and Northern Affairs Economic Development – Operations, "Chez hair is Open for Business to Men and Women," *Ideas* 4:1 (Spring 1976), 14-15.

She also turned down the army's alternative, to work at Kingston Penitentiary as a guard. Mary Ann also took up the offer for a hairdressing course, but after working for a while, she decided to do clerical upgrading to get a good government job instead. Unused to working with men, she went into the salon business with Edith, who had been in the same company as her, and then on her own until retirement after Edith left in 1969. Mary Ann recalled that she "didn't see any Indian people in Ottawa for years and years."⁹⁸

There were also a number of women who set up reserve-based shops, reminding us again that the Placement and Relocation program's intention to facilitate permanent settlement in urban areas did not always translate to reality. A 1961 survey of placement candidates looked at 12 of the 200 placements in Toronto, interviewing 10. This survey found that five of the participants were uncertain if they would return to the reserve, two replied decisively "no," one wanted to return after retirement and two were optimistic of eventually establishing small businesses there, which was not uncommon for hairdressers.⁹⁹ The department even wrote a 56-page book on the matter of "Establishing Beauty Salons and Barber Shops on Indian Reservations" in 1975. Many on-reserve shops were run out of people's own homes, as was the case for Mrs. Julian of the Milbrook Reserve near Truro Nova Scotia, who had trained at the Trans Canada Beauty Industries school in Moncton NB. Mrs. Julian was 28 and widowed, and although she received some financial help towards her fees, she had paid for her own board and lodging while in Moncton. She "bought the necessary equipment from her own

⁹⁸ Grace Poulin, *Invisible Women: WWII Aboriginal Servicewomen in Canada* (Thunder Bay: D.G. Poulin/Ontario Native Women's Association, 2007, 57-60 and 105-108.

⁹⁹ RG 10, Volume 8426, File 401/21-3, pt. 4, Memorandum to Indian Affairs Branch, from Regional Supervisor, Toronto Re: Evaluation – Employment Placement Program, 6 April, 1961.

resources” for her successful beauty salon.¹⁰⁰ Mrs. Peter Skye and Mrs. Gilbert Thomas and her daughter Eva started up beauty salons at Six Nations in the late 1960s. Skye, who set up a “small modern beauty salon” in Oshweken, had trained in Brantford. The Thomases started a “small but convenient” hairdressing shop at the back of their house, reporting “although the situation was tough at the beginning... there is [now] enough money to pay the bills.”¹⁰¹

The Indian Politics of Beauty and Style

Why was hairdressing a popular option for Aboriginal women when it was so poorly paid? Hairdressing may have afforded an opportunity for independence to those who had few other options. It also profoundly resisted contemporary imposed and popular images of Indian women thus also was a means to create, practice and popularize alternative representations. The literature on African American beauty culture links hairdressing as a trade to questions of how notions about beauty and style interacted with politicized racial and national identities. It remains to be seen if and how urban labour and hairdressers specifically are linked to the flourishing of new forms of modern Indian styles in the post-war period and particularly '60s and '70s, however I think this field is worth further inquiry and investigation.

Scholarship on Aboriginal women has demonstrated that the construction of “Princess”/“Squaw” images was integral to the colonization process. These constructed

¹⁰⁰ “Mother of Five Runs Beauty Salon,” *The Indian News*, (December 1960), 4. Mrs. Genevieve Julian, 28 and widowed, operated a beauty shop out of her “welfare house” on the Millbrook Reserve near Truro. She went to the Trans-Canada Beauty Industries of Moncton, NB, and received some financial help toward her fees, but paid for her own board and lodging while in Moncton.

¹⁰¹ “Iroquoian Women Adjust to Changes,” *The Indian News* (February 1968), 4, 5.

identities worked to subjugate Aboriginal women, and really spoke more of the desires and anxieties of non-Natives.¹⁰² This does not, however, preclude Aboriginal women's own exclusive or hybrid concepts of beauty, which stood as important community and personal standards for both belonging and leadership. Those who study images have tended to distinguish "good" from "bad," "realistic or "unrealistic," depictions, but it can be more instructive to evaluate the context in which the images are used. Images of Aboriginal women could, for example, demonstrate integration and "progress" to some; cultural survival, nationalism, identity and experience to others; and assimilation, colonialism, genocide and propaganda for programs of termination still to others. Wendy Kozol and others argue that it is in this "ambivalence," or in the slippery space of interpretation, where enormous possibilities lie for forcing a reckoning of colonialist narratives with Aboriginal women's experience of colonialism, resistance and belonging.¹⁰³ Like African American models, for example, images of womanhood for Native people that announced appeal, deportment and urban middle-class status, challenged racist notions that they were unattractive beasts of burden.¹⁰⁴

Indian Princess contests, which were run annually at stampedes, exhibitions and fairs, rewarded cultural concepts of beauty, academic achievement and political activism

¹⁰² See for example: Janice Acoose, *Iskwewak—kah'ki yaw ni wahkomakanak: Neither Indian Princesses Nor Easy Squaws* (Toronto: Women's Press, 1995), Daniel Francis, *The Imaginary Indian: The Image of the Indian In Canadian Culture* (Vancouver: Arsenal Pulp Press, 1997), and Rayna Green, "The Pocahontas Perplex: The Image of Indian Women in American Culture," *Massachusetts Review* 16 (1975), 698-714.

¹⁰³ Wendy Kozol, "Miss Indian America: Regulatory Gazes and the Politics of Affiliation," *Feminist Studies* 31:1 (Spring 2005), 64-94.

¹⁰⁴ Laila Haidarali, "Is it True What they Say About Models?": The Work of African American Models in early Post World War II America," presented at the Labouring Feminism Conference and Feminist Working Class History in North America and Beyond, Toronto Ontario, 29 Sept– 2 Oct, 2005.

at community, provincial and national levels. Aboriginal women also participated in non-Native beauty contests. In 1961, Marvel student Madeline Murdock, from Fisher River, was selected as the school's representative in the annual Miss Manitoba beauty contest held at the Red River Exhibition, and Diane Smith of Six Nations, won Miss Ontario in the same year.¹⁰⁵ There was even a Miss Indian Affairs contest. Margaret Brant, Miss Indian Affairs for 1960, and also runner-up in the Miss Civil Service contest, was secretary-treasurer of the newly formed Indian Association of Ottawa.¹⁰⁶ Kahn Tineta Horn, "Mohawk Princess," fashion model, actress and Mary Kay cosmetic saleswoman (and DIA employee), combined beauty with assertiveness to become one of the most famous Aboriginal activists of the 1960s. She advocated for Indian control of land and resources, a return to traditional ways, and was involved in protests from the Jay Treaty to Oka and beyond.¹⁰⁷

In the Miss Indian Affairs contest, and many others, some contestants were not "real" Indians, but were associated in different ways with authentic Indianness. For example Lucile Wheeler was crowned "a blonde Indian princess," in Montreal in 1959 after she won the downhill title.¹⁰⁸ It was presumably her achievement in athletics that made Wheeler an "Indian" of sorts, however the political convictions of Indian allies were also celebrated in terms of beauty. For example, there was also a tradition of non-Native style icons appearing at Indian demonstrations, protests and rallies.

¹⁰⁵ *The Indian News*, (December 1961), 8; *The Indian News*, (June 1961), 8; *The Indian News* (December 1960), 2.

¹⁰⁶ "Mohawk Girl Chosen Miss Indian Affairs," *The Indian News* 4:3 (December 1960), 2.

¹⁰⁷ Gretchen M. Bataille and Laurie Lisa, eds. *Native American Women: A Biographical Dictionary* New York: Taylor and Francis, 2001. Available on-line as an e-book at <http://www.netlibrary.com.proxy2.lib.umanitoba.ca/Reader/>.

¹⁰⁸ Clipping from the *Camsell Arrow* 12:4 (March-April-May, 1959), n.p.

As Patrizia Gentile argues in her work on post-war beauty contests, the spectre of “Miss Indian” should not be merely cast as a ridiculous stereotype, but rather considered carefully the ways she posited new definitions of gender, sexual and labour practices which responded to changing cultural, political and social needs.¹⁰⁹ Indian Princess contests posed serious questions to the powerful narrative that associates urban living with cultural loss. As opposed to the literature on women and sexual danger in cities, the literature on Native people and cities has endeavoured almost exclusively to recount the “realities” of urban native people from a singular point of view. One “reality” dominates: “cultural loss” in the face of modernity. Even the best of this literature, which pays close attention to the important material circumstances of urban living (both in the cities and in terms of Indigenous sovereignty and land) and deals with associated issues of poverty, dislocation and unemployment, relies on class and culture as a co-dependent program of loss.

Jennifer Nez Denetdale reminds us, however, of how images and contests of Indian beauty operate within gendered and colonial structures of power, many of which were disciplinary rather than liberating, and imposed rather than “traditional.” In her investigation of Navajo Indian princess contests, she locates princess contests as “hidden in the discourse surrounding Indian nations and nationalisms.”¹¹⁰ She finds that the contests grew in an “atmosphere where Navajo leaders were extolling Navajo progress

¹⁰⁹ Patrizia Gentile, “‘Government Girls’ and ‘Ottawa Men’: Cold War Management of Gender Relations in the Civil Service,” in Gary Kinsma, Deiter K. Buse, and Mercedes Steedman, eds., *Whose National Security? Canadian State Surveillance and the Creation of Enemies* (Toronto: Between the Lines, 2000): 131-141.

¹¹⁰ Jennifer Nez Denetdale, “Chairmen, Presidents, and Princesses: The Navajo Nation, Gender, and Politics of Tradition,” *Wicazo Sa Review* 21:1 (Spring 2006), 10.

within the Western meaning of progress,”¹¹¹ including Western styles of Indian political organization. These systems, she and others have shown, resulted in a loss of Native women’s traditional rights, including land use, property and livestock and primary care of children, secluded women in the domestic realm with little political and economic power and subsequently wrote them out of leadership positions in tribal governments.¹¹²

Princess contests, she argues, in many ways celebrated this marginal position as “traditional,” or at the very least did little to contest its legitimacy: they presented a certain type of idealized Indian woman who was connected to both mainstream modern progressive society and a past continuum of culture and tradition.¹¹³ I would add to this that those photographs that remain from Indian Princess contests are cleansed of the labour behind beauty and exist in files wholly separate from the many others that depict the “nimble fingers” of Native women doing people’s hair.¹¹⁴ In 1970, the Manitoba Indian Brotherhood sponsored an all-Indian pilot course at the Academy of Modelling and Self-Improvement on Portage Avenue. The class flew to Toronto to model traditional and contemporary Indian clothing at the Canadian National Exhibition in a fashion show sponsored by the Indian Hall of Fame Committee. Three of the models worked for Indian political organizations (the Manitoba Indian Brotherhood, the National

¹¹¹ Denetdale, “Chairmen, Presidents, and Princesses,” 27 n. 49.

¹¹² Jo Ann Fiske argues that colonialism “dislocates women as producers, undermines their social position, and discredits their abilities as public leaders and decision makers.” “Fishing Is Women’s Business: Changing Economic Roles of Carrier Women and Men,” in Bruce Cox, ed., *Native Peoples, Native Lands: Canadian Indians, Inuit and Metis* (Ottawa: Carleton University Press, 1987) 186.

¹¹³ Denetdale and Smith argue that we have to look at how “tradition” is used to disenfranchise women.

¹¹⁴ For more on the photos of contest winners, see Kozol. She studies pose and form in the photos of Miss Indian America and local pow-wow princesses, arguing that the photos contain Indian identity with the gender politics of fashion photography, among other things.

Indian Brotherhood, and the Manitoba Métis Federation Office), and they all worked as secretaries, clerks or receptionists.¹¹⁵

Why would an Indian political organization sponsor a modelling competition? Joanne Fiske and others argue that, in many ways, women are symbolic representations of the nation.¹¹⁶ Denetdale points out, however, that the Miss contest Indian presents a combination of ideal Indigenous womanhood and imposed notions of ideal Euro-American, middle-class womanhood, including purity, chastity, morality, virtue and domesticity. Her body was a “site of surveillance” subject to severe moral and social regulation.¹¹⁷ Contest rules eliminated women who were over twenty-four years of age, had ever been married or pregnant, consumed alcohol or tobacco, or cohabitated as a couple. Along with this surveillance of age, sexuality and behaviour came questions about race and heritage, reminding us of how Indian princess contests also espoused concepts of authenticity of colonial origin based on blood, physical appearance and the state-imposed systems that regulated them. This analysis of Indian princess contests

¹¹⁵ Linda Lafreniere, Secretary, MIB, also Miss Folklorama; Valerie Klyne, secretary, Manitoba Métis Federation office, also 1969 Manitoba Indian Princess; Eileen Fitzner, payroll clerk and part-time student who has a modelling assignment at Garen City Shopping centre; Pauline Wood, Receptionist at the Manitoba Rehab Hospital, 1970 Manitoba Indian princess; Mabel Sinclair, former legal secretary and RR college social work graduate; Shirley Fontaine, secretary at National Indian Brotherhood. “First Indian Models Gorgeous At Graduation,” *Winnipeg Free Press*, Saturday August 15, 1970.

¹¹⁶ Joanne Fiske, “The Womb Is to the Nation as the Heart Is to the Body: Ethnopolitical Discourses of the Canadian Indigenous Women's Movement,” in Pat Armstrong and M. Patricia Connelly, eds., *Feminism, Political Economy and the State: Contested Terrain* (Toronto: Canadian Scholars' Press, 1999): 293-325, Sarah Banet-Weiser, *The Most Beautiful Girl in the World: Beauty Pageants and National Identity* (Berkeley: University of California, 1999) and Elwood Watson and Darcy Martin, “*There She Is, Miss America*”: *The Politics of Sex, Beauty and Race in America's Most Famous Pageant* (New York: Palgrave MacMillan, 2004).

¹¹⁷ See J.R. Miller and Myra Rutherdale, “‘It's Our Country’: First Nations’ Participation in the Indian Pavilion at Expo ’67,” *Journal of the Canadian Historical Association* (Spring 2007).

holds true also outside of the Navajo nation, as the rules for the 2007 Miss Manito Ahbee Pageant in Winnipeg attest.¹¹⁸ It is interesting that Indian princess contest rules correspond not only to rules for other beauty pageants, but also to the narratives about Indian women in cities.

On a very important level, beauty is about making yourself visible, being seen and being remembered. Native people have used this concept to present images that quite often resist those imposed on them. Shelley Niro, a Mohawk artist from Six Nations, confronts the validity of visual and written images created by Euro-Canadians of Aboriginal people in her work. She said of her *Mohawks in Beehives* series that she gathered her three sisters and said “let’s get rid of our kids and just have a fun day of it, let’s go downtown [Brantford] and have lunch and be really loud and obnoxious. ... I think that in a way, we were taking control.” They put on make up, did up their hair and

¹¹⁸ The Miss Manito Ahbee Pageant, part of Winnipeg’s Manito Ahbee pow wow, demands “proof of ancestry or Tribal Affiliation (ie Photocopy of Status Card, Métis Card,” as well as proof of age, an essay about the contestant in their own handwriting and an application form. Letters of recommendation and current photographs are optional. The competition is based on a dance competition, public speaking abilities, a private interview and knowledge of “Tribal Tradition.” Contestants win money, a crown and banner, and ‘other miscellaneous gifts.’ Along with the application form is a “code of Conduct and General Guidelines” from which if the contestant deviates, she will be disqualified as a contestant. All contestants must sign a statement referring to their knowledge of and submission to these rules. The code includes: “It is very important for you, as a contestant and an individual, to maintain certain moral standards for yourself now and in the future. It is mandatory that you and your fellow contestants conduct yourselves above and beyond reproach. This means that you will refrain from the use of alcohol, drugs, smoking in public, profane language, and/or outbursts of any kind. Unacceptable socializing with a boyfriend (i.e. intimate display of affection, etc.) in public is also not allowed. This type of behaviour will not be tolerated. ... You affirm that you have no dependents (children) nor have not had any children. Also should you be selected as Miss Manito Ahbee, it would not be acceptable to cohabit with an intimate companion.” Miss Manito Ahbee Pageant Application, November 2007. Manito Ahbee Website: <http://www.manitoahbee.com/pdf/Miss%20Manito%20Ahbee%20Pageant%20Application.pdf> accessed January 15, 2007.

“invaded the city as an act of personal empowerment.” “People have a stereotypical idea of what Native women are all about,” she states. “We’re portrayed in the movies as cardboard cut-outs and when you try to present a different image, people are disappointed. I want to blow that out.” She has another portrait of her mother under a hairdryer in the kitchen entitled “The Iroquois Is a Very Highly Developed Matriarchal Society.”¹¹⁹

Conclusion

In this chapter, I have attempted to outline some of the key features of the urban placement and relocation program, run by Indian Affairs in the mid-twentieth century. This program was in many ways similar to models of “rehabilitating” TB patients, that were delivered in sanatoria in the post-war period. It is also quite likely that the program grew in part out of the similar contemporary initiatives meant to relocate Indigenous people to urban areas in the United States. In its vision, the program would draw Indians out of unemployment, ahistorical obscurity, poverty and marginality to an ultimate terminus of integrated and invisible equality through a careful process of vocational training and permanent employment played out by officers and candidates and written onto forms. Because this process was seen to involve a special period of “social adjustment,” this allowed the department and its agents unfettered access into the social lives of Indian workers.

Native women could not access just ‘any’ kind of full-time urban employment. In the program, hairdressing courses were particularly popular. Some of the larger

¹¹⁹ See “Shelley Niro,” in “A Time of Visions,” Interviews by Larry Abbott, http://www.britesites.com/native_artist_interviews/sniro.htm accessed May 8, 2008.

questions in the salon and beauty field include segregation and integration, entrepreneurship, resistance and subjugation and finally the particular associations of beauty and Indianness in the 1950s and 1960s are addressed in the last half of this chapter.

The Indian Affairs Department associated relocation, training and placement in the urban beauty industry with permanent social integration for Aboriginal women, but it is clear that the story is far more complicated. Moreover, the analysis of Aboriginal women's participation in a wage economy as some sort of clash with mainstream society and urban life is equally simplistic. What this chapter has tried to do is to show what many Native hairdressers had to negotiate, including various structures of gender, class and imperial strictures as well as discursive strategies of "expectation." Cities and Indians, modernity and tradition cannot be understood in isolation from one another. The city was not the terminus of culture and tradition, nor was "tradition" a singularly liberating and decolonizing space for Aboriginal women. Historian Philip Deloria asks us to re-think those "dichotomies built around crude notions of difference and assimilation, white and Indian, primitive and advanced" in order to discover the "complex lineaments of personal and cultural identity."¹²⁰ Aboriginal hairdressers force us to do just that.

¹²⁰ Deloria, *Indians In Unexpected Places*, 14.

Chapter Four

An Early Labour History of Community Health Representatives¹ 1960-1970

A Community Health Representative, or CHR, is a public health educator who promotes well-being and access to services by applying specific skills in a community's language and culture. When this Indigenous labour force was envisioned in Canada in the late 1950s, CHRs were to be a sort of cultural link between the mostly non-local health professionals of the Medical Services Branch (MSB)² of the Department of National Health and Welfare and the Native and Inuit communities they served. While their jobs were never this simple, the original duties of CHRs were to encourage fellow community members to use federal Indian programs, to distribute official health education materials and to explain the local culture and health needs to the MSB (mostly field nurses).

Within this job, specific tasks were allocated according to gender. Women were to focus

¹ There were other terms such as "Native Health Workers," "Settlement Workers," "Community Health Workers," "Health Aides," "Nurses Aides," "Sanitation Aides," "Community Health Auxiliaries/Aides" and "Community Aide," which sometimes carried different duties and responsibilities. Community Health is now undertaken under a number of different titles including not only "Community Health Representative," but also "Community Health Worker," "Community Health Educator," "Community Wellness Worker," as well as specialized titles in prenatal care, diabetes and drug and alcohol addiction. I will be using "Community Health Representative," in this chapter, as it is the term that is now used by the National Indian and Inuit Community Health Representatives Organization. Some quotes in this chapter refer to Community Health Workers or Health Aides.

² The Medical Services Branch (MSB) or Indian Health Services (IHS) was the branch of the Department of Health and Welfare responsible for delivering health services to First Nations and Inuit people since 1945. It is now known as First Nations and Inuit Health Branch, or FNHIB.

on maternal and child care and “health habits,” while men were to focus on building and sanitation, including home improvements, water supply, garbage disposal, privies and wells. Alongside this gendered division of CHR labour, which was justified as “cultural,” came different selection guidelines, duties and wages.

The CHR program’s history touches on many of the issues discussed in this thesis on twentieth-century Aboriginal women’s work, including federal labour programs, Indian education and the importance of place. It has, however, a distinct historical context as a community development labour plan to train and employ Indigenous people for civil service positions within an extraordinarily hierarchical and particularly obstinate federal department. This chapter will demonstrate how the CHR program was gendered and feminized by exploring the inaugural decade of the program in Canada, about 1960 to about 1970. In particular, it will look at how gender and race were central to the program’s organization in the selection of candidates, the training program, and the supervision of Community Health Representatives.

Despite the fact that, since 1970, most CHRs are women, scholars have been silent about the gendered aspects of CHR work. Indeed, there is little historical analysis of the CHR program at all, and what there is more broadly follows a trend to fashion Indigenous health as a subject of the community health science and social science fields. Truncated as it often is from feminist and post-colonial approaches, this literature generalizes low education levels of Native people and associates this with their inability to access higher-end health human resources positions and the patronizing character of community development programs. Moreover, as modern Indigenous labour, CHR work seems to have fallen into a void that includes Indigenous labour, post-war Indigenous

history and a tendency in medical history to focus on health “professionals,” most notably doctors and nurses.³

The secondary literature on the CHR program actually quite closely follows the primary material, most of which comes from the Department of National Health and Welfare, its affiliates or its contractors and was therefore federally approved before being released to the public. The primary sources include program and promotional material written by Miss Ethel Martens, the Health Education expert for the Medical Services Directorate in charge of the program in the 1960s, and official evaluations of the program. Other primary sources come from the Medical Services Branch files of the Department of Health and Welfare at Library and Archives Canada. These records include monthly reports by nurses and CHRs themselves, correspondence, curricula, reviews and guide books.

A feminist anti-colonial critique of patriarchy as well as race and subordination in CHR work seems to be out of place, particularly in light of the resistance of many Native scholars to feminism more generally.⁴ The silence on the topic of gender in CHR work may be partly due to the idea that Native men and women are seen to have innate or natural differences, so inflexible and cultural as to be otherwise unremarkable. However,

³ James B. Waldram, D. Ann Herring, T. Kue Young in many ways characterize this work by dealing only momentarily with the CHR program. They argue that it “smacked of tokenism, since at the time there were no efforts to train Aboriginal people for the more advanced medical positions” *Aboriginal Health in Canada: Historical, Cultural and Epidemiological Perspectives* (Toronto: University of Toronto Press, 2000), 253. Chantelle Richmond’s work, which examines CHRs and Aboriginal community structure, stands apart: “Social Support as it Shapes Aboriginal Health,” (Ph. D. Diss., McGill University, 2007).

⁴ Verna St. Denis summarizes these positions in her article “Feminism is for Everybody: Aboriginal Women, Feminism and Diversity,” in Joyce Green, ed., *Making Space for Indigenous Feminism* (Winnipeg: Fernwood Publishing, 2007), 33–51.

new literature in the Indigenous Studies and American Indian Studies fields has encouraged scholars studying Native people to be “feminist without apology” or to continue a critique of patriarchy as it enacts, through colonialism, the domination of Indigenous women.⁵ This chapter in many ways responds to that literature, by exploring, in the form of a case study on CHRs, the specific ways patriarchy was written into Indigenous labour in post-war communities.

Background to the CHR Program

There are three major factors that stimulated the Community Health Representatives program. First, organized international efforts in the emerging field of community development influenced the founding principle of the CHR program that locally trained Indigenous people, employed by the state, would inspire communities to engage in projects to raise their own standard of living to that of the so-called developed world. The United Nations defined community development as “the process by which the efforts of the people themselves are united with those of Government authority to improve the economic, social and cultural conditions of communities, to integrate the communities into the life of the nations and to enable them to contribute fully to the national progress.”⁶ Community development as formulated in the CHR program was indeed about making modern and improved Indigenous communities and integrating them with the nation so that all could work together for progress and share equally in its

⁵ See Andrea Smith, *Conquest: Sexual Violence and American Indian Genocide* (Cambridge MA: South End Press, 2005) and Green, ed., *Making Space*.

⁶ Library and Archives Canada, Record Group 29 National Health and Welfare (hereafter RG 29), Volume 2709, File 804-4-1 pt. 1, Ethel G. Martens, “Training Public Health Auxiliary Workers in Community Development,” Paper prepared for Seminar at University of North Carolina, Chapel Hill, May 5-9 1963.

profits. Individuals engaged in paid positions were to assist communities in “coping” with modernity or, as one proponent awkwardly put it, “to smoothen the jump into the 20th century,” with its accompanying wage economy, modern homes and outboard motors.⁷

In Canada, and for Indigenous people, community development was enacted in policy and practice by the federal government, the second key factor in the CHR program. Ethel Martens, an individual active in the international scene, translated these ideas into a program that suited the needs of the Medical Services Branch of the Department of Health and Welfare. As a rule, the MSB workforce was non-local and transitory and so it was thought that CHRs could bridge the “culture gap” between medical staff and Aboriginal communities.⁸ This gap was also one of economic and social class.⁹ The CHR program was also a half-hearted response to a fairly longstanding dispute between Indian Affairs and Health Canada over which department was responsible for educating a much-needed Indigenous healthcare workforce. In this case, Health Canada developed a three-part training program, for which Indian Affairs agreed to pay education and transportation expenses along the lines of its (unofficial) post-secondary funding policy. After a period of probation, male CHRs, under the direction of

⁷ RG 29, Volume 2704, File 804-4-1 pt. 1, Anne Grant, “Health Education at the Top of the World,” Reprinted from the International Journal for Health Education, Volume VIII No 1.

⁸ RG 29, Volume 2709, File 803-3-1 pt. 1, Ethel G. Martens, “Planning and Implementation of A Health Programme,” Paper presented to the Canadian Public Health Association Annual meeting, 28 May 1963, Winnipeg, Manitoba.

⁹ “The Native people,” were apparently “less apt to be appalled by the poverty and ignorance which often immobilizes someone from a more prosperous culture.” RG 29, Volume 2709, File 803-3-1 pt. 1, Ethel G. Martens, “Training Public Health Auxiliary Workers in Community Development.”

a “committee” and female CHRs, under the direction of a public health nurse, were to be hired on civil service contracts with Health Canada.¹⁰

Finally, Martens also justified the program with a well-worn argument about welfare: “Canada cannot afford to ignore the potential of the Indians to contribute to Canada’s economy, she wrote. “Many are existing on welfare. It is sound economics to train as many as possible for productive jobs.”¹¹ As a federal labour program, the CHR program was highly characteristic of post-war Indian Affairs and Health Canada’s approach to both Indigenous labour and health policy, including the ultimate goals of Indian integration and the transfer of federal responsibility for services to Indian communities to the provinces¹² and, of course, the complete lack of consultation with Indigenous communities until the final, implementation stages.¹³

¹⁰ The contracts were originally supposed to be permanent, but most were one-year renewable ones.

¹¹ Ethel Martens, *Mexico and Canada: A Comparison of Two Programs Where Indians are Trained in Community Development* (Ottawa: Department of National Health and Welfare, 1966), 31.

¹² RG 29, Volume 2706, File 804-4-2 pt 3, Minute Sheet – Indian and Northern Health Services Department of National Health and Welfare: Subject, Evaluation study on the First Health Worker Training Program, Preliminary Report 13 April 1964 and letter to Medical services from Regional Superintendent, Medical Services, Central Region 8 May 1964, Re: Preliminary Report of CHWs. The CHR job was conceived as a dead-end and precarious position low on the Indian Health Services hierarchy and was ultimately created with the intention of being phased out to provincial services. Thought to be a “temporary expedient to solve a temporary problem,” it was suggested that the resulting “disposal problem” of CHRs (“most of them ... too old or inadequately educated for any other professional training”) be dealt with by “turning them into social workers.” By 1964, the program was slated to be “phased out” over a 5 year period. See also Martens, *Mexico and Canada*.

¹³ Leonard Bluebird and Dorothy Krasaukas, “Canadian First Nation Control of Health: A Successful Case Study,” in B. Postl, P. Gilbert, J. Goodwill, M. Moffatt, J. O’Neil, P. Sarsfield, T. Young, eds., *Circumpolar Health 90: Proceedings of the 8th International Congress on Circumpolar Health*, Whitehorse, Yukon, May 20-25, 1990. In this era, CHRs were also not invited to attend meetings concerning Community Health Workers recruitment, training even after the program had started. It was not until 1977 that First

While the program was envisioned at the international level and geared towards Canadian needs, it is also important to recognize what was taking place in post-war Indigenous communities. The need for greater access to education and employment opportunities, control over the planning and undertaking of health programs and the overall improvement of the health status of their people were issues coming to the fore in 1960s Indian politics. But communities also had a long history of engaging in health care both inside and outside of the Medical Services Branch. Plans for “Health Aides” programming were part of ongoing efforts to train Aboriginal women to deal with the most pressing public health issues on reserves – infant mortality, nutrition and housekeeping.

The program came on the heels of a noteworthy expansion in the number of Aboriginal women training as Registered Nurses, Licensed Practical Nurses and Registered Nurse Assistants in the 1950s. Most of these women moved to urban centres for training and found jobs serving urban communities. Men engaged in what was called “general labour” or as “fireman-labourers” at Indian hospitals, clinics and nursing stations. Notably, trained orderlies were also in demand by the MSB, and several accessed training through Indian hospital rehabilitation programs. The creation of locally trained health care providers on reserves was therefore appealing to many communities. In Canada, CHR training also grew alongside various other initiatives to train nurse’s aides and Sanitation Aides, to set up Health Committees on reserves, and to teach health

Nations had the opportunity to be involved in the program by attending a meeting to develop a National CHR Curriculum Guide. Assembly of First Nations, “Community Health Representatives Proposal for Enrichment and Expansion” Background paper, May 30, 1988, 5.

education and leadership in Indian Folkschools, Health and Sanitation Workshops, Indian Adult Health Education programs and St. John's Ambulance Home Nursing courses.¹⁴

The work of CHRs required their ready acceptance by their communities and by the MSB as both health professionals and cultural ambassadors. It was "hybrid" work, requiring them to be Indigenous, "grass-roots" and community-sensitive on the one hand; and, on the other, to be responsible to the teachings of federal services for Indians. It was a hybridity that hinged on two essentialist and authentic roles. Fluency in Aboriginal languages and recognized local leadership, while being job requisites, carried no real status in the workplace as cross-cultural communication was not a recognized skill until later on in the 1980s, when curricular shifts in nursing education indicate an interest in training non-Aboriginal nurses in it.¹⁵ Moreover government work was perceived as alienating CHRs from their communities and program evaluators noted that the program

¹⁴ Laurie Meijer-Drees, "Training Aboriginal Nurses: The Indian Health Service in Northwestern Canada, 1939–1975," paper delivered by special invitation to the Hannah Conference in the History of Medicine, University of Ottawa, June 2005, 14. See also Aboriginal Nurses Association of Canada, *Twice As Good: A History of Aboriginal Nurses* (Ottawa: Aboriginal Nurses Association of Canada, 2007).

¹⁵ In a Job Description and Terms of Reference sheet for Community Health Workers, "To act as interpreter when necessary" was the 7th and last in a list of "duties." RG 29, Volume 2704, File 804-4-1 pt. 2, Community Health Workers Medical Services Department of National Health and Welfare. Translators worked not only in instructional capacities, but also had critical roles with respect to patients, physicians and nurses, who may have held very disparate views of both illness and treatment. As others have argued, they are not objective, uninvolved intermediaries, neutral, but advocates mediating conflicting values. While unaccredited as professional or paraprofessional work, the job involves taking on multiple and sometimes conflicting roles including that of direct translators, informants, biomedical interpreters and patient advocates. Joseph M. Kaufert and William W. Koolage, "Role Conflict Among 'Culture Brokers': The Experience of Native Canadian Medical Interpreters," *Social Science and Medicine* 18:3 (2005), 283-286 and Joseph M. Kaufert, Robert W. Putsch and Margaret Lavalley, "Experience of Aboriginal Health Interpreters in Mediation of Conflicting Values in End-of-Life Decision Making," *Circumpolar Health* 96 (1998), 44-45.

was understood as just another government initiative in which they had little say.¹⁶ In their own monthly reports, CHRs stated that they were often thought of as agents of the state, confused with social workers, welfare workers and Parks Canada and Ministry of Natural Resources staff.¹⁷ They were indeed asked to help with fishing, mining prospector licensing and to act as interpreters for Indian Affairs, the RCMP and others.¹⁸

The “self-help” model itself was formulated on the principles of “indigenization,” a technique that, as scholar Valerie Galley argues, is used to govern Aboriginal people and make them into productive citizens.¹⁹ To push this analysis one step further, we must also see if and how patriarchy worked in this indigenization process. Unlike other federal labour programs for Indians, which saw employment and assimilation into the dominant Canadian society tied neatly together, the CHR program endeavoured to train an Indigenous labour force that would be true to its people. Working on a principle that education was irrelevant to Indian people, language and local leadership were to be the only necessary skills and qualifications for the job. Also unlike other labour programs

¹⁶ Health and Welfare Canada, *Task Force on Community Health Auxiliaries* (Ottawa: Medical Services Branch, 1973).

¹⁷ RG 29, Volume 2709, File 804-4-x 200 pt. 1, “July 1965 Narrative” by CHR Eliza English, Brochet. See also Monthly Report Community Health Worker, Draft, Sept, 1962, stating people requested advice about “commercial fishing, mining, prospector licensing.”

¹⁸ RG 29, Volume 2706, File 809-4-2 pt. 3, Community Health Representative Training July 63 to Aug 64, “Problems Raised by Community Health Workers – Norway House Course.”

¹⁹ Valerie Galley, “Indigenization as Neoliberal Rule: The Case of the Canadian Aboriginal Head Start Initiative,” (MA Thesis, Trent University, 2004). Related to this, is that the CHR program developed in the era of Indigenous production of studies about Indigenous people. The program called for reports, surveys, notes, memoranda, and evaluations suggesting a new era of record-taking, categorizing and assessing populations in order to supervise, reform and service those deemed victims or deviants. Franca Iacovetta and Wendy Mitchinson, eds. *On The Case: Explorations in Social History* (Toronto: University of Toronto Press, 1998).

targeted particularly at (although not exclusive to) the young and the single, CHR stipulations in this era included that workers be married and, if women, thirty-five or older.

Communities were invited by the MSB to participate in the CHR program by way of interpreting the program to nursing staff and Indian agents who would in turn promote the program among Chiefs and Councils.²⁰ It was proposed that by 1962–3 there would be forty-six CHRs and it was estimated that 170 would be employed by the end of a five-year period.²¹ During the first year of the program, eleven CHRs were trained in Norway House in 1961–2 and placed in their own communities; within a decade, several other CHR full and “refresher” courses were undertaken, most of them north and west of Norway House.²² By 1967, there were 73 CHRs trained and 63 working with Medical Services.²³ In 1969, it was suggested that one full-time CHR be hired for every 500 people and one part-time for every 100–500 people. The success of the program was said

²⁰ Martens was actually reprimanded for not following the approved lines of communication, through zone superintendents first. Representatives of Indian Affairs and Indian Health services met with Bands and Councils gave them an ‘itinerary,’ asked for their opinion, explained their work, left posters, and requested bands to pick their own applicants. The cost per student in the program was an estimated at \$55 for meals, \$15 for accommodation in staff quarters and \$30 “for personal requirements.” RG 29, Volume 2709, File 804-4-2 pt 2, Minutes of Meeting – Training of Eskimos 10 August, 1962; and RG 29, Volume 2709, File 804-4-2 pt 2, letter to Miss E. Martens from O.J. Bath, MD, Regional Superintendent (Central), 2 April, 1962.

²¹ RG 29, Volume 2705, File 804-4-2 pt. 1, “Native Health Worker Programme Indian and Northern Health Services,” n.d.

²² Cambridge Bay, NWT (1963), Norway House (1963), Fort Qu’Appelle, Saskatchewan (1964), Hobbema, Alberta (1965), Inuvik 1965), Norway House (1967), Fort Churchill, Manitoba (1967-8), Fort Qu’Appelle, Saskatchewan (1970); Brandon, Manitoba (1970), Moose Factory, Ontario (1971), Coqualeetza, British Columbia (1971-2). There was also a two-day gathering in Thunder Bay in 1972 to discuss Alcoholism, and a “Health Animator Program began in Quebec ca. 1975.

²³ Department of National Health and Welfare Canada, *Community Health Worker Program Analysis and Evaluation* (Ottawa: Medical Services Branch, 1967).

to have revolved around three key aspects: “careful selection, adequate training, and the right kind of supervision.”²⁴ Indeed, there is more material about these three aspects of the program than any other and so I will base the rest of this chapter loosely on these three angles.

Gender, Maturity and the CHR Selection Process

The selection of candidates for training was the first step in the MSB’s hiring procedure for CHRs. The selection process of CHR candidates began by allowing anyone “qualified by a lifetime knowledge of his community”²⁵ to apply for the position regardless of education level or English language proficiency. Next, Chiefs and band councils chose four finalists from among the applicants to submit to a Branch-appointed committee, usually the Regional Planning Committee (of Indian Health Services), which would make the final selection. The committee chose the successful candidate based on the following criteria: “their acceptance by the people as respected and trusted members of the community,” their “leadership qualities and sensitivity to the needs of the people” (demonstrated by participation in existing community programs), and “their intelligence, resourcefulness and maturity. “Maturity” was shorthand for patriarchal and heteronormative values that restricted young and single men and all but older, married women from becoming CHRs. Although never stated outright, it appears that the original goal of the program was to hire men and women equally, perhaps with the purpose of having a gendered pair of CHRs work in each community. By 1970 and until today,

²⁴ Health and Welfare Canada, *Task Force*, 116.

²⁵ Department of National Health and Welfare, *The Community Health Worker in Indian and Eskimo Communities Canada* (Ottawa: Medical Services Branch, 1970).

however, women have outnumbered men and the selection process itself played a role in the feminization of the profession.

Age, Dependents, Marital Status and “Maturity”

It is noteworthy that academic qualifications and technical training, which in other contexts have served to limit pools of candidates and justify a preference for hiring white and hiring men, were not prerequisites for the job of CHR. Indeed, they were secondary in the selection criteria to leadership and maturity, or “his or her ability to lead and to work with people.”²⁶ In reality, CHR job ads, application forms and terms of reference all required specific skills, including not only the ability to speak the local language in order to be able to teach, but also the ability to speak, read and write basic English in order to communicate with Branch staff and file reports.²⁷ Moreover, application forms asked detailed questions about formal education (including reasons for leaving school), occupational experience, income and participation in community clubs and programs. The reverse side of the form, filled out by federal personnel, contained sections on “personality estimate,” and “mental ability and attitude.”²⁸

²⁶ RG 29, Volume 2706, File 804-4-2 pt. 3, General Comments – Community Health Worker Programme.

²⁷ RG 29, Volume 2704, File 804-4-1 pt. 2, Community Health Workers Medical Services Department of national Health and Welfare. An inability to speak English did in fact disqualify some Inuit Community Health workers from attending a training session in 1963. When asked about potential CHR candidates, O.J. Rath, Medical Services Superintendent Central Region complained, “Unfortunately we did not find any. Northern Affairs Adult Education Officers had very successfully combed the villages for likely students for their several projects and left no English speaking available Eskimo.” RG 29, Volume 2706, File 804-4-2 pt. 2, Letter to the Director, Medical Services from O.J. Rath, Regional Superintendent, Central Region, 20 February, 1963.

²⁸ RG 29, Volume 2706, File 804-4-2 pt. 3, Community Health Representative Training July 63–Aug 64.

“Maturity” was not, however, simply a subjective evaluation, but in fact the Branch was quite specific about it in terms of age, dependents (in the case of women) and marital status. According to the stipulations of the program, a minimum age requirement was set at 25 for men and 35 to 40 for women.²⁹ Age qualifications were specified because, the Branch explained, “the type of person wanted is the person who is influential in forming public opinion. This generally excludes the very young and inexperienced.”³⁰ The logic was also explained as sensitive to a “‘respect due to age’ attitude” among communities, and a stereotype of youth as “irresponsible and ‘roustabout.’”³¹

The separate age requirement for women, it was said, was for “practical” reasons. It was meant to ensure that female candidates had no children below school age, a secondary qualifier of “maturity” and one that applied to women CHRs only. These regulations were written into the selection process on the grounds that the formal training program involved a substantial amount of time away from the community, the Branch refused to take responsibility for child care (except in the case of male CHRs), and, ultimately, the nature of CHR employment was full-time. It was noted several times that for *all* candidates, “long absences from home” posed problems of loneliness for families, worry over welfare “etc.”, and restlessness to return to their communities.³² But for male

²⁹ The maximum age for CHRs was 64. Ethel G. Martens, “Culture and Communications – Training Indians and Eskimos As Community Health Workers,” *Canadian Journal of Public Health* 57:11 (November 1966), 497.

³⁰ RG 29, Volume 2704, File 804-4-1 pt. 2, Medical Services Department of National Health and Welfare Community Health Workers September 1965.

³¹ Edward J. Abramson, Robert Arnold and Gerald Piper, *The Community Health Worker Program: A Critical Analysis and Evaluation* (Ottawa: Medical Services, National Department of Health and Welfare, June 1964), 28-29.

³² RG 29, Volume 2704, File 804-4-1 pt. 1, Ethel G. Martens, “Training Public Health Auxiliary Workers in Community Development,” 12.

CHRs only, Indian Affairs was responsible for providing a welfare subsidy if necessary while the candidate was on training.³³

Maturity was also identified by marital status: both male and female CHRs had to be married people.³⁴ The MSB did not explain why marital status was important to the job, but it is noteworthy that the same requirement also applied to elected female chiefs in the same era.³⁵ In other contexts, a vague term, “sexual jealousy,” was used to describe some animosity towards certain CHRs during training sessions or when working in a community. Both of these concepts worked within contemporary values of the dominant Canadian society, which saw signs of heterosexuality like marriage as safe, normal and reliable. The question of marital status arose several times, particularly in instances where candidates met all other criteria. The need for a CHR in the area where the candidate lived was weighed against their disqualification because they were single or, as was common at the time, living in common-law relationships (although several reserves in Canada had outlawed locally the practice of living common-law – a policy that targeted interracial relationships while encouraging state-sanctioned unions and “legitimate” children).

³³ Northern Affairs pays for training of Inuit CHRs and eventually the process was run through Manpower. One 1965 pamphlet explained, “The Indian Affairs Branch, being responsible for Indian education, says the expenses of Indian candidates and Northern Affairs, for the same reason, finances Eskimos. This includes transport and an allowance of \$100 a month, out of which the candidate pays for his board and lodgings, and any support required by the family of a breadwinner away from home.” RG 29, Volume 2704, File 804-4-1, pt 2, Medical Services Department of National Health and Welfare Community Health Workers, September 1965.

³⁴ RG 29, Volume 2709, File 804-4-2, pt 4, Memorandum to Director, Medical Services From Regional Superintendent, Foothills Region M. Matas 13 July 1965.

³⁵ Cora Voyageur, “The Community Own You: Experiences of Female Chiefs in Canada,” in Andrea Martinez and Meryn Stuart, eds., *Out of the Ivory Tower: Feminist Research for Social Change* (Toronto: Sumach Press, 2003), 228-247.

It almost seems a reversal of mainstream logic to target for employment exclusively middle-aged, married women with children, particularly in the 1960s, when, in Canadian society at large, it was still expected that women in public positions would quit upon marriage, or at least once they had children. In reality, it actually just serves as a reminder of how limited (but no less powerful) that trope actually is to the experience of white, middle-class women. For example, nearly all MSB nurses (its largest sector of employees), were young, unmarried and with no dependents, as suited the ideals of femininity and sexuality in the field of nursing. Mobile, single and independent, these women were the attractive³⁶ face of the modern and expanding system of federal health care. Behind the wheel of jeeps and station wagons, they flaunted a relationship with motor vehicles that flew in the face of what was considered normal for Canadian women. In the manly MSB uniform, reminiscent of a militarized Canadian womanhood, they showcased their sacrificial, yet non-traditional work as heroic because it suited national interests³⁷ and expensively and attractively performed the work of the nation. Ironically, their primary task as public health nurses was to teach women how to be settled, married and dependent – those lessons which informed the pamphlets, films and felt boards of the time.³⁸ A temporary transgression from the confines of regular work and family life,

³⁶ Dave Quance, “Nancy Ferguson, 27, is Nurse to 1,400 Saskatchewan Indians,” *The Winnipeg Tribune*, Sat, Jan 12, 1957, clipping in *The Camsell Arrow* 10:5 (January-February 1957). Details about nurses’ eye colour, hair colour, stature and attire invariably accompanied descriptions about their work; their physicality seemed to be enhanced by the ‘dirty’ and rugged backdrop of their labour.

³⁷ Susan Hartman, “Women’s Employment and the Domestic Ideal in the Early Cold War Years,” in Joanne Myerowitz, ed. *Not June Cleaver: Women and Gender in Postwar America, 1945–1960* (Philadelphia: Temple University Press, 1994).

³⁸ There is a lot of material from which to draw here; for example see: Bureau of Northwest Territories and Yukon Affairs, *The Book of Wisdom for Eskimo* (Ottawa: Department of Mines and Resources, Lands, Parks and Forest Branch, 1947) and

MSB nursing really only defined, rather than contradicted, the post-war feminine ideal.³⁹ The single status of northern nurses was a source of some controversy in the Branch, particularly in discussions of “fraternization” between white women and Aboriginal men.⁴⁰ MSB nurses usually lived in physically segregated, government-subsidized accommodations,⁴¹ and the MSB discouraged Native members of the community from visiting the living quarters of nursing stations. Whereas “white weddings”⁴² between non-Aboriginal people in Indigenous communities were made legitimate through

Department of National Health and Welfare, *A Book for Mother and The Pre-Schooler* (Ottawa: Indian and Northern Health Services, 1958). Felt boards were popular teaching tools for children in the 1960s and 1970s. They looked like black boards, but were made of felt and displayed images and words also made of felt.

³⁹ See for example Elaine Tyler May, *Homeward Bound: American Families in the Cold War Era* (New York: Basic Books, 1988), Mary Louise Adams, *The Trouble With Normal: Post War Youth and the Making of Heterosexuality* (Toronto: University of Toronto Press, 1999), and Mona Gleeson, *Normalizing the Ideal: Psychology, Schooling and the Family in Post-War Canada* (Toronto, University of Toronto Press, 1999).

⁴⁰ For example, one Aboriginal nurse Jennie Neilson, while working in Bermuda in the 1950s recalls a head nurse nursing supervisor telling all the Canadian nurses “You’re in the top drawer of society and that’s where you want to be at. Don’t go out with Portuguese and black men.” The head nurse also told them that “just like in Canada they wouldn’t go out with an Indian on a reserve, they shouldn’t go out with men of other races in Bermuda.” Stacey O’Brien, “Jennie Nielsen,” *Lethbridge Herald*, June 5, 2006, A3.

⁴¹ Helen Gilbert, “Great Adventures in Nursing: Colonial Discourse and Health Care Delivery in Canada’s North,” *Jouvert: A Journal of Postcolonial Studies* 7:2 (Winter/Spring, 2003) at: <http://social.chass.ncsu.edu/jouvert/v7i2/gilber.htm> accessed May 2, 2008. Meijer Drees and McBain argue that Saskatchewan northern nurses “spent little of their social time within the Aboriginal communities they served.” They suggest that a “prevailing attitude of superiority and the social distance some nurse felt from the communities they served... could also have been related to the fact that most were unmarried during their terms of service in the north, and that their service hours were long.” Laurie Meijer Drees and Lesley McBain, “Nursing and Native Peoples in Northern Saskatchewan: 1930s-1950s,” *Canadian Bulletin of Medical History* 18:1 (2001), 56 and 58.

⁴² Joan Sangster, “Constructing the ‘Eskimo’ Wife: White Women’s Travel Writing, Colonialism and the Canadian North, 1940-1960,” in Magda Fahrni and Robert Rutherford, eds., *Creating Post-War Canada: Community, Diversity and Dissent, 1945-1975* (Vancouver: University of British Columbia Press, 2007), 23-44, and Chrys Ingraham, *White Weddings: Romancing Heterosexuality in Popular Culture* (New York: Routledge, 1999).

widespread, public celebration, mixed marriages between nurses and Indian men were not so publicly celebrated.⁴³ The marriages were normalized in a popular romance genre that limited the forms of expression these relationships could take, focusing on how the chemistry of patriarchy, labour, identity, anthropology and post-war 'integration' worked to create happy Canadianness.⁴⁴

⁴³ Intermarriage was discussed by the MSB in remote terms, or as something that happened in "former times" between fur traders and Native women. RG 29, Volume 2912, File 851-1-A501 pt 1. "Health and Disease at the Norway House Indian Agency." Otherwise, the MSB spoke to the biology of mixed-race children, focusing on its capacity to be healthier, smarter and with "admirable qualities" (for which the 'white blood' accounted). Elsewhere, encounters between white men and native women are sexualized as deviant, dangerous and coerced while intermarriage between Native men and white women factored into the war experience of Aboriginal men while 'away.'

⁴⁴ One example of this was a double marriage between two white women to "Eskimo" men in the late 1950s. "Fraternization between whites and Eskimos, despite government anxieties, sometimes has a happy ending," began one article. One of these young women, Grace Margaret Pinder, of Goderich, Ontario was a registered nurse at the Moose Factory hospital, where she met her husband Elijah Menarik who worked as an orderly in the same hospital. "The nurses lived on the third floor of the Moose Factory Hospital and the orderlies on the second," the article explained. "In view of the close quarters and what Mrs. Menarik describes as a "grave boy shortage," fraternization was inevitable." While Mrs. Menarik's joke about the "grave boy shortage" might be in located in a heterosexual nursing culture dominated by women, it also might insinuate that its access to *white* men was what was in shortage. However, "her decision to marry an Eskimo" was not how her "pre-marriage problems" were explained, rather it was their "differences in education" (Elijah was "raised at an Anglican mission and given a grade-school education") and the fact that "he is an orderly and she is a nurse and the officers shouldn't mix with the troops." At their wedding, at a Presbyterian church in Toronto, it was said that "the minister was only interested in whether my husband could support a wife." When the article was published, they were living in a "middle-class housing project in residential Manor Park" where "she gets along with her neighbours extremely well" while her husband was either "hitting the books at night school to improve his English and mathematics" and worked for the department of northern affairs and national resources. They looked "forward to a return to the wonderful freedom of the north" and planned to be transferred so to Frobisher Bay, where "Mr. Menarik probably will supervise a rehabilitation centre with a staff of whites working for him." "A week with her husband's relatives gave Mrs. Menarik a taste of the old Eskimo ways but she says neither she nor her husband are hardy enough for it. Her husband's parents died in a measles epidemic and he was brought up in an Anglican mission. "The only thing Eskimo about him is his parentage." "Two Girls Happily Wed to Eskimos," "Officials

Discussing a late 1950s program to train Indigenous health workers in the North Yukon, Zone Director MacKinnon stated that “young married adult women will be the most effective [community health] workers.” He explained that although “[t]raining will involve child care and increased costs” (which were in fact never assumed by the federal government), “the wastage resulting from teaching single girls that do not return to their homes will be greater.” Here, MacKinnon was likely referring to a trend in Indian post-war education that resulted in longer-term moves for training and employment. He would also be sensitive to (but not necessarily irritated with) the fact that, by the heightened gender discrimination included in the revised 1951 *Indian Act*, if Indian “girls” married anyone other than a status Indian, they would become enfranchised, lose community membership altogether *and* in fact not be *permitted* to return to their homes. He went on, “The young married adult men will be the next most effective group, particularly if given other education in health and training in building trades. The selection of a married couple for training is the best solution because the family unit would have clear objectives and the ability to carry them out.”⁴⁵

Approve Women Marry Eskimo Husbands,” clipping in *The Camsell Arrow* 13:3 (January-March 1960), 74. (Elijah became a CBC radio announcer, part of the Eskimo Affairs Committee 1958, and while Elijah was in Ottawa, two nieces visited and were placed by a social worker as au pairs). Later, it was said that “Government officials are proud of the two marriages. Northern experts regard them as the best possible advertising for their claim that full integration is a realistic objective.” Bruce Phillips, “Fraternization Has Happy Ending,” and “Two Girls Happily Wed to Eskimos,” in “Officials Approve Women Marry Eskimo Husbands,” *The Camsell Arrow* 13:3 (January-March 1960), 74.

⁴⁵ RG 29, Volume 2705, File 804-4-2 pt. 1, letter to Regional Superintendent, Foothills Region, INHS Edmonton From Zone Superintendent, Yukon Zone, NDD MacKinnon 24 Sept, 1958.

The vision of men and women being trained in equal numbers and hired on in communities in pairs was continually debated by CHR program evaluators.⁴⁶ For the first CHR training session in Norway House, Manitoba in 1962, seven men and four women were selected (with two other men who trained separately as dental assistants). Among the CHRs, two of the men were former chiefs and/or council members, and two had been in the army. Two of the women had served as elected council members.⁴⁷ Other work experience included farming, guiding, trapping, fishing, working with the Indian and Métis Friendship Centre, leadership courses, working as a community development officer, lay delegate for the United Church of Canada, and vocational training and employment as a ward aide.

The Gendered Pair in Indian Public Health

In his 1964 report, sociologist Dr. Abramson also recommended a female and a male worker for each reserve. One of his reasons for recommending both male and female workers was a purported “sexual jealousy” in the communities. He explained,

It is very difficult for a male worker to talk to the women of the reserve without arousing a great deal of suspicion and jealousy from their husbands, especially if they are away a great deal of the year. Similarly, the women workers find it difficult to talk to the men about improvements in the home, about digging garbage pits or about building privies, yet the man must be approached about these matters, even if through their wives, since such matters are thought of as men’s responsibility. It seems that the women workers have had less difficulty with sexual jealousy than the men, but one would suspect that younger women would have more problems with it than the present workers.⁴⁸

⁴⁶ Health and Welfare Canada, *Community Health Worker Program Analysis*.

⁴⁷ By 1966, it was noted that “several women were band councillors.” Martens, “Culture and Communications,” 499.

⁴⁸ Abramson et al, *Critical Analysis*, 16-17.

Another reason for recommending two health workers was to divide labour by gender and thus expand the “transfer of health concepts” and lighten the workload on each CHR. Seasonal employment was another obvious reason for employment in gendered pairs. If men were working off reserve, single CHRs had to either forgo visits to them or travel great distances and be absent from the rest of the community. It was suggested by a Northwest Territories planning committee in 1966 that men could work in “outlying areas” and women in “more settled areas.”⁴⁹

The recommendation of two CHRs was rejected by Southern Manitoba zone superintendent J.G. Nicholas, who argued that “[t]heir main function is health education at which workers can set their own pace. Results will therefore depend, not on the number of workers, but on how well they can “get through.”⁵⁰ In another response to the study, it was explained that while male and female health workers may be an “ideal solution” to sexual jealousies, “there is a limit as to the amount of health education we can push down people’s throats and two workers in a relatively small area would soon saturate the community with health education and may even create antagonisms to health promotion in general.”⁵¹ In reality, whereas there was a recognition that women workers would contribute more to family health and men more on “community organization on

⁴⁹ RG 29, Volume 2706, File 804-4-2 pt 4, Minutes of the Meeting of Committees to Plan Community Health Worker Training Program Northwest Territories, 1966.

⁵⁰ RG 29, Volume 2706, File 804-4-2 pt. 3, Letter to Regional Superintendent, Medical Services, Central Region From Zone Superintendent, Southern Manitoba Zone, J.G. Nicholas 15 May, 1964. Re: Health Aide Evaluation Study.

⁵¹ RG 29, Volume 2706, File 804-4-2 pt. 3, Letter to Medical Services from Regional Superintendent, Medical Services, Central Region 8 May, 1964, Re: Preliminary Report of CHWs.

solving problems,”⁵² the MSB refused to fund two CHRs per community, and many individual CHRs dealt with more than one community.

Feminization

It is noteworthy that individuals suggested selecting either a woman alone or a gendered pair, not once just a man alone. In another, earlier incarnation of the program, the Eastern Regional superintendent argued that “if they chose to select a woman ... this may have advantages – the women are always at home if children are sick and need attention and always on hand for camp accidents while men may be away, also ... women [have] always taken an active part in obstetrics and infant care. These would be important facets of the trainees’ work.” This individual also opted for “husband and wife teams,” or “son and mother teams.”⁵³

While it was Ethel Martens’ plan to train both women and men, she was not insistent upon either gender parity or gendered pairs. For example, Martens recommended only male candidates for the second CHR training program in the Foothills region, at Cambridge Bay in 1963, although not without criticism.⁵⁴ The planning committee was upset by her decision because the “big problems in the North” were seen to be “in the field of child and maternal health – care of children – nutrition, etc.”⁵⁵ Martens, without referring to the added stipulations about age and dependent children on

⁵² RG 29, Volume 2706, File 804-4-2 pt. 4, Minutes of the Meeting of Committees to Plan Community Health Worker Training Program Northwest Territories, 1966.

⁵³ RG 29, Volume 2705, File 804-4-2 pt. 1, Letter to Regional Superintendent, eastern Region from H.B. Sabeen, MD, Medical Officer, Pangnirtung, 2 May, 1958.

⁵⁴ RG 29, Volume 2706, File 804-4-2 pt. 2, Community Health Worker Training Program Foothills Region Meeting 26 November, 1962.

⁵⁵ RG 29, Volume 2706, File 804-4-2 pt 4, Minutes of the Meeting of Committees to Plan Community Health Worker Training Program Northwest Territories 1966.

female candidates only, argued that “there seems to be more difficulty in recruiting women than men.”⁵⁶ The fifth training program, held in Fort Churchill at the Churchill Vocational Centre trained five Inuit and one Native person, four men and two women. According to Martens, it “had the smallest number of trainees than any previous course and their average [age] of 30 made them the youngest class to date.”⁵⁷ Their educational background and command of English was mixed, but Martens was silent with regard to both marital status and number of dependents. These two sessions seem to have been as close as Martens got to her original vision for the program, as she most frequently referred to them. By the Moose Factory, Ontario, program in the spring of 1971, marital status, age, and number of children were each recorded.

Until after the 1960s, men outnumbered women, usually by about a third but by 1973 the overall ratio of CHRs on staff favoured women.⁵⁸ The following table is based on incomplete and sometimes contradictory numbers culled from a variety of sources about the CHR courses, but it provides a sense of the changes in CHR selection over a period of about ten years. For example, despite goals to hire only older married women, five of the twenty women in the 1970 program were unmarried (listed as “Miss”).

⁵⁶ RG 29, Volume 2705, File 804-4-2 pt. 1, Progress Report of the Sub-Committee on the Native Health Worker Training Program n/d Ethel G. Martens Chairman.

⁵⁷ RG 29, Volume 2707, File 804-4-2 pt. 7B, “Community Health Worker Training Programme Fort Churchill, Manitoba.”

⁵⁸ By 1973, it was noted that only in the Manitoba, Saskatchewan and ‘Northern regions’ did training programs have more men than women.

Table 1**CHR Training Programs, 1961-1971**

Session and Date	Men	Total Women	Women ("Miss")	Women ("Mrs")	Total CHRs
Norway House 1961-2 Full	7	4	0	4	11 (plus 2 male dental assistants)
Cambridge Bay 1963 Full	8	0	0	0	8 (all Inuit)
Norway House 1963 Refresher	5	0	0	0	5
Fort Qu'Appelle 1964 Refresher	5	2	0	2	7
Fort Qu'Appelle 1964 Full	14	12			26 (all from Ontario, Manitoba, Saskatchewan and Alberta) (2 Dental Assistants, both women)
Hobbema 1965 Full	n/a	n/a	n/a	n/a	26
Inuvik 1965 Refresher	n/a	n/a	n/a	n/a	n/a
Norway House 1967 Refresher	n/a	n/a	n/a	n/a	n/a
Fort Churchill 1967-8	4	2	n/a	n/a	6
Fort Qu'Appelle 1970	12	20	5	15	32
Brandon 1970 Refresher	8	6	0	6	14
Moose Factory 1971 Full	17	21	5	16	38 (most from Ontario)
Coqualeetza 1971-2 Full	n/a	n/a	n/a	n/a	n/a

What the chart does not show is that by 1973, only 67 per cent of those trained were working as CHRs: 47.9 per cent of the men and 81.9 per cent of the women who were trained got jobs. On staff overall, there were 99 women and 45 men⁵⁹ and while

⁵⁹ Health and Welfare Canada, *Task Force*, Appendix B.

there was less of a discrepancy in Ontario and Manitoba, the Pacific region had 22 women and 3 men working as CHRs in 1973. Why the trend towards training and hiring women? On a practical level, the federal government began to take responsibility for problems of water supply and waste management in the North, which raised the question about whether the male CHRs were needed in certain areas.⁶⁰ While the CHR program seemingly favoured women we should remember, too that perhaps more women than men applied in the first place.

Gendered Training in the CHR Program

What did a program of training look like for Community Health Representatives in the 1960s? The most obvious and practical difference between the CHR program and other contemporary federal training and employment opportunities for Native people was that CHR education and employment was set, controlled and supervised by Health Canada personnel, not Indian Affairs or post-secondary institutions in conjunction with labour or professional organizations. It was also entirely non-transferable outside of the Medical Services Branch and was related on the one hand to the Branch's contemporary image of Native people as students and on the other to its image of Native people as workers, as reflected in the program's wage structure. CHR training and wages were two aspects of the program interrelated by the subordination of women in a federal and colonial labour program.

⁶⁰ RG 29, Volume 2706, File 804-4-2 pt. 4, Minutes of the Meeting of Committees to Plan Community Health Worker Training Program Northwest Territories, 1966.

Outline of Training

There were three basic components planned for CHR training. The first was an orientation running from six weeks to two months and supervised by field nurses. It involved surveying reserves for facts and attitudes about health conditions and learning about the work of teachers, the RCMP, missionaries and government workers.⁶¹ The second component was a period of formal training, which took place in a classroom and lasted between six weeks and three months. The formal training focused on basic technical knowledge of public health (including germ theory, nutrition, a St. John Ambulance First Aid course, dental hygiene, the hazards of smoking and drinking, fire safety, social problems and family health), developing skills in problem-solving, and “community action”⁶² and practicing different types of teaching methods and aids, including audio-visual aids like films and filmstrips, models, flip charts, felt boards, posters and pamphlets.⁶³ It was held that candidates should not be removed to a new

⁶¹ RG 29, Volume 2706, File 804-4-2 pt. 3, News Release 21 April, 1964, “Self Help Programme for Indians.” As the program became more standardized, CHWS were to undertake three projects during their orientation, making a map of their community showing houses and facilities, doing a “community appraisal” which included the numbers of people in various age groups, types of housing available and health statistics; and an inquiry into the health knowledge of their people by interviewing. Health and Welfare, *The Community Health Worker*, 1970.

⁶² RG 29, Volume 2706, File 804-4-2 pt. 3, General Comments – Community Health Worker Programme; and RG 29, Volume 2704 File 804-4-1 pt. 1. Anne Grant, “Health Education at the Top of the World.”

⁶³ The program at Fort Qu’Appelle outlined the activities which must be performed by each of the students, a list which included the following: 2 minute talk to group; 5 minute talk to group; use of film strip projector; use of 16 mm movie projector; give talk with a film strip; introduce a movie; prepare a flannel board display; talk with a flannel board display; prepare a flip chart; talk with a flip chart (ie. teaching); prepare a poster; prepare a bulletin board display; use the duplicator; head a discussion; write a letter; fill in a report form; use the tape recorder; give a chalk talk; prepare a lesson plan; introduce a speaker; plan for a meeting; and give a 15 minute talk to a group. RG 29, Volume 2706, File 804-4-2 pt. 3, General Comments – Community Health Worker Programme.

environment for training during this phase, and so training was held in a chosen community using local schools and community halls. The third component of the training program was a one-year probation period of supervised on-the-job training in the CHR's own community.

CHR training was funded by the Department of Indian Affairs according to the standards used to fund students attending vocational schools, colleges and universities (transportation,⁶⁴ books and equipment and a 'monthly allowance,' or wage, from which room and board was drawn). Candidates each earned \$100 per month during the orientation and formal training period,⁶⁵ and during their formal training period, they paid approximately \$70 for their room and board out of this amount.⁶⁶ Ethel Martens would deposit everyone's cheques into one account at a local bank, of which board, coffee and recreation fees were paid. Then, each had access to an equal portion of whatever was left in the account.

⁶⁴ Travel expenses for staff were covered by their own department headquarters RG 29, Volume 2705, File 804-4-2 pt. 1, Intradepartmental Correspondence to the Director, Indian and Northern Health Services, from Central Regional Office, Winnipeg, 17 Nov, 1961.

⁶⁵ If CHRs were receiving relief assistance, then it was deducted from the wages drawn from training. RG 29, Volume 2706, File 804-4-2 pt. 3, letter to John Joseph Leveque, Indian Hospital Fort Qu'Appelle, from A.G. Leslie, Regional Supervisor of Indian Agencies, 28 April, 1964.

⁶⁶ RG 29, Volume 2706, File 804-4-2 pt. 2, Community Health Worker Meeting 29 October, 1962. The 100 dollars was based on the amount Indian Affairs paid to students taking technical training: \$64.00 per month for maintenance allowance, \$15.00 per month spending allowance and \$20.00 per month clothing allowance. It was noted in this meeting that it was necessary to pay the men as much as a caretaker. RG 29, Volume 2705, File 804-4-2 pt. 1, Minutes of a Meeting of the Regional Committee on the Native Health Worker Training Program, held in Indian Health services Office, Winnipeg, 9 March, 1961.

Gendered Content of CHR Training

Most of the training program focused on “General Health Education” for all CHR trainees and included family health, dental health, and environmental health. The training program held in Cambridge Bay, for example, explored topics such as “water pollution,” “introduction to excreta disposal systems,” “how disease travels,” “general sanitation, housing, lighting, ventilation,” and “skin diseases and their control.” It also explored teaching methods in a panel entitled “Teaching in the community – how people learn, barriers to learning.”⁶⁷ Microscopes were set up and the students observed microbes that contaminate food and water and cause epidemics.⁶⁸ The group took field trips to find and discuss “problems,” attended inspections of kitchens and bathhouses, discussed food preparation and handling and learned how to organize Clean-Up Campaigns. A white rat experiment was conducted to learn about nutrition, and budgeting was taught by a trip to the Hudson’s Bay Company to price food.⁶⁹ Topics for training sessions centred around nine main areas: housekeeping/renovating, germ theory/common illnesses/diseases/skin conditions,⁷⁰ child and maternal health,⁷¹

⁶⁷ RG 29, Volume 2709, File 804-4-2 pt. 2, Community Health Worker Training Program for Cambridge Bay, NWT.

⁶⁸ RG 29, Volume 2704, File 804-4-1 pt. 1, Anne Grant, “Health Education at the Top of the World.”

⁶⁹ RG 29, Volume 2706 File 804-4-2 pt. 3, Community Health Worker Training Program, Cambridge Bay Progress Report 20 July, 1963.

⁷⁰ Discussions of diseases/skin conditions included impetigo, lice, scabies, diarrhoea and gastrointestinal disorders, rabies, diabetes, alcohol and drug addiction, and also surveys of Hepatitis, Venereal Disease, polio, x-rays, immunizations and tuberculosis. “Germ Theory” organized much of these discussions.

⁷¹ Child and Maternal Health topics included information for new mothers, pre-post natal care, cleanliness and bathing the baby, feeding (breast and formula), holding well-baby clinics and neglected children.

fire/accident prevention; and food/nutrition,⁷² waste/water management,⁷³ pest control,⁷⁴ dental health and First Aid.

Although the education was mostly general, gender divisions were written into the content of CHR training. The class was divided into men's and women's groups for up to two weeks of the formal training. In these groups, women attended discussions of "public health nursing subjects" taught by a nurse while men received practical sanitation training, safe water disposal, housing and home improvements by a sanitarian. While both men and women took a St. John Ambulance course in First Aid, women also took a "home nursing" course. Training for women included a special emphasis on maternal and child health, child growth and development and the need for prenatal and postnatal care; men were instructed in water barrel and incinerator construction. During the on-the-job period of training, women were to focus on maternal and child care and "health habits" under the local nurse's supervision, while men were to solve "sanitary problems" (garbage disposal, constructing privies and wells) and reported to a local health committee comprised of local band and federal government authorities.⁷⁵

At least one individual voiced criticism that the content remained too fixed on this gendered binary. In the 1970 course at Fort Qu'Appelle, MSB sanitarian F. Cayer noted that CHRs were "oriented toward working with nurses and health educators" and so "on graduating [they] will not appreciate the importance of calling on sanitarians for any

⁷² Food topics included diet, vitamins, nutrition, recreation, shopping and budgeting.

⁷³ Water and waste management included the construction of garbage, privies, pits, incinerators, organizing spring clean-ups, chlorinating and otherwise testing and sampling water in barrels wells, lakes and rivers, and teaching community members the importance of boiling water.

⁷⁴ Pest control focused on, but was not limited to dogs and flies.

⁷⁵ RG 29, Volume 2711, File 804-2-1, "Community Health Workers For Indian and Northern Health Services Department of National Health and Welfare," 1961.

problems.” It was also pointed out that women in the program were excluded from meetings held with sanitarians. These meetings would have dealt with issues of waste management, possibly pest control, and water testing, chlorination, barrels, sampling and wells.

Cayer also criticized that during training, Native people were “often treated as children.”⁷⁶ In an article on one of the popular contemporary health education books for the north, *The Book of Wisdom for Eskimo*, McNicoll, Tester and Kulchyski position Indian and Inuit health education as an expression of modern Canadian colonialism characterized in part by the book’s extremely patronizing and paternalistic content and style, its lessons in “self-reliance” and its racist content.⁷⁷ Much of the content of CHR training could be studied as part of a history of education to Aboriginal people, which, while extending teaching roles to Natives, still embraced a colonizing curriculum and infantilizing methods of instruction. The program used contemporary literature produced by Health Canada that was purposefully regulatory and simplistic and unabashedly bolstered diet and health information packaged by the Milk Foundation, the Canadian Dental Association, and the Canada Food Guide that was as impractical as it was imperial for many of the Indigenous communities served by CHRs in these years. Most of it was targeted directly at women. Ethel Martens was also a fan of films, filmstrips and animated shorts, integrating at least one or two per day into the training schedule and often showing certain films repeatedly. The films were mostly produced by the National

⁷⁶ RG 29, Volume 2707, File 804-4-2 pt. 7B, Memorandum to Regional Director, Ontario from Regional Sanitarian F. Cayer, 14 October 1970.

⁷⁷ Paule McNicoll, Frank Tester and Peter Kulchyski, “Arctic absterion: *The Book of Wisdom for Eskimo*, modernism and Inuit assimilation,” *Etudes/Inuit/Studies* 23 (1-2) (1999), 199-220.

Film Board, Crawley Films or Health Canada, but some were Disney shorts from the 1940s and 1950s, all of which barely concealed Cold War North American politics of domesticity and security and heteroracist patriarchal nationalism (“Defense against Invasion,” “Water: Friend or Enemy,” “Planning for Good Eating,” “Food for Freddie”). These films carried much the same message as those talked about by Ken Smith in his book on post-war classroom mental hygiene films.⁷⁸ They depicted heterosexual nuclear families run by male breadwinners and dealt with a range of topics from germs and good nutrition to adolescence and child safety targeted at a younger audience. In all ways they reflected the norms federal agencies wanted to impose on Aboriginal communities.

Gender, Race, Wages

These messages would not have been new to post-war Indigenous communities, but they were enacted in the imbalanced structures of CHR training, most notably characterized in wage structures. There is actually a fair amount of archival material surrounding the appropriate remuneration of CHR work. Debates over salaries for CHRs were inflected by the original vision of a voluntary labour force and the standardization of Indian Affairs funding for training. Ultimately, decisions regarding wages for CHRs were made in relation, both among those working in Health Canada, and between men and women CHRs.

In the post-war period Indian Health Services saw itself as a long-serving national charity rather than a shared and reciprocal institution involving, at the most simple level, all lands held by Canadians. The community development philosophy of self-help,

⁷⁸ Ken Smith, *Mental Hygiene: Better Living through Classroom Films 1945–1970* (New York: Blast Books, 1999).

noticeably without a critique by the Canadian labour left, attached quite well to the IHS, bolstered also by post-war anthropological and sociological understandings of the havoc modernity and dependency were wreaking in Indian communities. According to these ideas, Indigenous health workers would function, in the words of P.E. Moore, head of Indian Health Services, “on a part-time basis free-of-charge from a spirit of service to their communities.” Part-time voluntary work would create a necessary “transitional step” to the industrial world of wage work while alleviating hostility for “culturally foreign elements” like paid workers. Bands would thus gain a “valuable” lesson in self-sufficiency and escape a pattern of aggressive dependency.⁷⁹ H.M. Jones, Welfare Superintendent of Indian Affairs, though not always the voice of reason, pointed out that it would in fact be difficult to persuade Indians to perform functions on a voluntary basis for which civil servants were paid. Furthermore, administrative control would be maintained by the department and its staff, limiting the extent to which Indian groups could be free to choose and act upon their own priorities, which were, in effect, the basic principles of community development.⁸⁰

Since they were not perceived as integral to the program’s ideals, salary scales and issues were thus one of the most under-developed aspects of the program at its outset. Positions were kept outside of civil service regulations for both temporary and permanent

⁷⁹ RG 29, Volume 2705, File 804-4-2 pt. 1, letter to Director Indian Affairs Branch, from P.E. Moore, 28 October, 1958. Re: Indian Adult Health Education and the Training of Health Workers. Moore conceded that “generally speaking, the bands that require the services of health workers are probably those bands which are the most impoverished and hence most likely in need of household and community hygiene.” RG 29, Volume 2705, File 804-4-2 pt. 1, letter to P.E. Moore Indian and Northern Health Services, from H.M. Jones, 21 Nov, 1960.

⁸⁰ RG 29, Volume 2705, File 804-4-2 pt. 1, letter to P.E. Moore Indian and Northern Health Services, from H.M. Jones, 21 Nov, 1960.

employees until 1963, when a standard wage scale for part of the country was finally set by the Treasury Board. In one job description, the salary section was left blank, with the following statement: “Necessary adjustments will be made for the prevailing rate in each area. Environmental allowance will be paid where applicable.”⁸¹ Elements of the voluntary ideals remained in the program, for example, the inability to be paid for overtime work.⁸² According to one job description, the CHR’s job was “full time” or “approximately 8 hours” daily and the “nurse as a general rule, should know at all times where to locate the Community Health worker during regular working hours.” Sometimes it was necessary for CHRs to “work in the evening or on weekends. When this happens,” contracts explained, “this should be considered as part of the week’s work.”⁸³

During the first two phases of training, salaries were equal between men and women, however, upon entering the probationary period of training, salaries differed markedly, and this was written into the program from the start. “Women will be paid \$150 monthly and men \$175 monthly for one year” explained the initial job ad in 1961.⁸⁴ In 1965, the difference was even more pronounced, paying men \$50 more than women.

⁸¹ RG 29, Volume 2704, File 804-4-1 pt. 2, Community Health Workers Medical Services Department of National Health and Welfare.

⁸² RG 29, Volume 2706, File 809-4-2 pt. 3, Community Health Representative Training July 63 to Aug 64, “Problems Raised by Community Health Workers – Norway House Course.

⁸³ RG 29, Volume 2704, File 804-4-1 pt. 2, Community Health Workers Medical Services Department of National Health and Welfare.

⁸⁴ RG 29, Volume 2704, File 804-4-1 pt. 1, Community Health Workers for Indian and Northern Health Services Department of National Health and Welfare ca. 1961.

Table 2
1965 CHR Salaries by Gender⁸⁵

	1st 6 months	2nd 6 months	2nd year
Women	\$185	\$195	\$205
Men	\$235	\$245	\$255

It appears that CHR wages were set relative not just to each other but to other MSB staff. For example, it was decided that a male CHR should make at least as much as a janitor,⁸⁶ but less than a certified nurse assistant.⁸⁷ The greatest fear was that a male CHR would earn as much as a public health nurse, since there would then be no incentive for nurses. One health official commented, “A married community health worker will in most instances find himself in a better financial position than the nurse in charge under whose jurisdiction he works. We will only add discontent and confusion if this is allowed to continue.” Another stated “these aides are getting as much salary as our nurses and this is likely to engender the attitude, ‘why the devil should I neglect my own work to help you when you are paid the same salary.’”⁸⁸ Along the same lines, a committee agreed that the salary scale for women be “below that of certified nursing assistant” (unless the

⁸⁵ RG 29, Volume 2704, File 804-4-1 pt. 1, Medical Services Department of National Health and Welfare Requires Community Health Workers (Male and Female) ca. 1965.

⁸⁶ RG 29, Volume 2705, File 804-4-2 pt. 1, Minutes of a Meeting of the Regional Committee on the Native Health Worker Training Program, held in Indian Health Services Office, Winnipeg, 9 March, 1961.

⁸⁷ RG 29, Volume 2705, File 804-4-2 pt. 1, Minutes of a Meeting of the Committee on The Native Health Worker Training Program, 14 February, 1961.

⁸⁸ RG 29, Volume 2706, File 804-4-2 pt. 3, letter from J.H. Wiebe, incomplete, no date; and Minute Sheet, Indian and Northern Health Services, Department of National Health and Welfare, Subject: Reports on Follow-up Visit on Community Health Worker Training Program, 29 January 1964. “Allowances for dependents” was argued as a justification for higher wages for Indian men CHRs.

person had certified nurse's training, and then adjustments could be made). No official salary was worked out for men by that committee, but it was suggested that basic salaries be the same as for women "with allowances for dependents."⁸⁹ Wage issues compounded with ideological differences and workload grievances to cause major dissatisfaction among rank and file Indian Health Service nurses. When the issue came up in a review of the program, one response was that revision of salary was not a priority, "particularly when a L.P.N., better educated and better trained, and carrying greater responsibility, only receives \$210 (max) and has to pay board and lodging and income tax."⁹⁰ Indeed, one woman who was interested in participating in the CHR program was a certified nursing assistant. She indicated that the pay would be less than she received as a Community Health Nurse Assistant.⁹¹

Salaries for graduates were the topic of discussion between one Northern Affairs official and a missionary in the Foothills region in the early 1960s. The missionary argued that \$175 per month was "not in keeping with the going rate for the Northwest Territories and that if candidates with leadership qualities were attracted, they would be lured away by more remunerative jobs later." He noted that that was only half the pay that a janitor received. Both wanted clarification of whether workers would be given "isolated post allowance,"⁹² which was indeed implemented when the Treasury Board

⁸⁹ RG 29 Volume 2705 File 804-4-2 pt. 1, Minutes of a Meeting of the Committee on The Native Health Worker Training Program, 14 February 1961.

⁹⁰ RG 29 Volume 2706 File 804-4-2 pt. 3, letter to Regional Superintendent, Medical Services, Central Region From Zone Superintendent, Southern Manitoba Zone, J.G. Nicholas 15 May 1964. Re Health Aide Evaluation Study.

⁹¹ RG 29 Volume 2706 File 804-4-2 pt. 4, letter to the Regional Superintendent, Foothills Region, Medical Services, From Regional Dietitian, W. Roscoe Foothills Region, 18 May 1965.

⁹² RG 29, Volume 2706, File 804-4-2 pt. 2, Community Health Worker Training Program

approved the wage rates for graduate nurses, ward aides and hospital attendants of the Department of National Health and Welfare).⁹³ It was said that the CHR salaries “are based on local prevailing rates and range, according to location, experience and any special responsibilities from \$260 to \$310 a month,”⁹⁴ more than the rates actually posted elsewhere by the Medical Services Branch.

In the 1960s, women earned \$25 to \$50 per month less than men. The only direct explanation for this pattern was from Ethel Martens, who argued that wage differentials by gender were “in keeping with the cultural pattern of Indian people.”⁹⁵ Wages of CHRs were in fact relative to standard wages already established in the Medical Services Branch, and in keeping with “the cultural patterns” of the mid-twentieth century Canadian civil service.

Gender, Race, Hierarchy and Supervision in the 1960s Indian Health Service

In the Indian Health Service, CHRs were added at the bottom of a rigid hierarchy of labour organized through a strict and centralized system of IHS administration. What is remarkable is that from Ethel Martens to the secretaries, cooks and housekeepers⁹⁶ who

Foothills Region, 26 November, 1962.

⁹³ RG 29, Volume 2704, File 804-4-1 pt. 1, Extract from the minutes of a meeting of the Honourable the Treasury Board, held at Ottawa, on 11 March, 1963.

⁹⁴ RG 29, Volume 2704, File 804-4-1 pt. 2, Medical Services Department of National Health and Welfare Community Health Workers September, 1965.

⁹⁵ RG 29, Volume 2706, File 804-4-2 pt. 2, Community Health Worker Meeting held 29 October, 1962 at the Regional office to discuss the number of delegates, place, time and feasibility for this program for Eskimos in the Foothills Region.

⁹⁶ For example, for the training program to be held at Cambridge Bay, two daily meals were prepared for CHRs by one of two local women. They had had allocated \$300 for four hours daily per month for a cook to prepare meals for eight people. RG 29, Volume 2706, File 804-4-2 pt. 2, Meeting Concerning Community Health Workers Training Program, 29 March, 1963. It was suggested that cooks and housekeepers hired for the

worked for her, the CHR program was run by women. Ethel Martens, who headed the CHR program, supervised the MSB nursing staff with regards to the program, and trained and oversaw the employment of CHRs and local support staff for the program, provides an excellent lens through which to view gender, race, hierarchy and supervision in the 1960s Indian Health Service.

Sex and the Civil Service: Ethel Martens

The distinctiveness of the CHR program in Canada was due to its founder and director, a Manitoban by the name of Ethel G. Martens. Martens was born in The Pas in 1916 and taught school in northern Manitoba. During the Second World War, she worked as an accountant for the Canadian government, and while she was working in Ottawa, she was introduced to the Baha'i faith. After the war she went to Australia and England (likely to teach), and then returned to start a B.A. in Economics and International Affairs at the University of Manitoba, becoming Baha'i in 1953, and earning the degree in 1954. She then worked as a health educator with the Province of Manitoba and obtained a Masters degree in Public Health from Berkeley in 1957. Martens was hired on by the Department of Health and Welfare in 1958 as the first Health Educator for the Medical Services Directorate, and worked in this capacity until the mid-1970s. Meanwhile she worked

1965 CHW program at Hobbema, Alberta be "two Eskimo girls" in an on-the-job training plan. It was hoped that 3 cooks could be obtained from Family Institute Courses in Hobbema, to be paid salaries of \$310 to \$375 per month. In addition, a cook's helper was to be paid \$250 per month. Cleaning of the classroom was arranged locally (using the staff hired from the cleaning of the clinic and residence), at \$1.25 per hour for a kitchen maid and housemaid. Miss Martens also requested part-time secretarial help for the duration of the Training Programme. RG 29, Volume 2706, File 804-4-2 pt. 4, Community Health Workers Training Program 1965 Regional Planning Committee Minutes 28 June, 1965.

closely with other Baha'i in "Indian teaching work,"⁹⁷ as a primary care consultant to the Baha'i international community and, after she retired in the late 1970s, in establishing the Baha'i International Health Agency. She served as adviser to the Privy Council on Health and Women's issues from 1970 to 1972 and earned a Ph. D. in Social Preventative Medicine from the University of Saskatchewan in 1973. Over her lifetime, Martens worked with the Canadian International Development Agency, US/AID and the World Health Organization as well as Health Canada. She received an Order of Canada (Health Care) in 1998 for her international and national work in the field of culturally sensitive public health.

In her position with the Department of Health and Welfare, Martens would have been among a small per cent of Canadian women who earned more than the average Canadian man. Her job was an upper-level civil service position in a department where she would have been one of the only women, apart from nurses. Also, she would have been one of the most educated. In her book *Pick One Intelligent Girl* Jennifer Stephen explores the massive mobilization and then demobilization of "womanpower" during and after the Second World War, including in the civil service, and describes some of the psychological, economic and managerial techniques used in those projects between 1939 and 1947.⁹⁸ Ten years after Stephen's study ends, Martens became one of a markedly growing number of white women in career civil service positions at Indian Affairs and Health Canada. What did women bring to the civil service in the 1960s? Following

⁹⁷ Patricia Verge, *Angus: From the Heart The Life of Counsellor Angus Cowan* (Cochrane, AB: Springtide Publishing, 1999).

⁹⁸ Jennifer A. Stephen, *Pick One Intelligent Girl: Employability, Domesticity, and the Gendering of Canada's Welfare State, 1939–1947* (Toronto: University of Toronto Press, 2007).

Stephen's argument, the simultaneous modernization and professionalization of three areas administered by the federal government – rescue/social work, education/teaching and nursing/public health – also corresponded with their feminization. Martens' job was, in effect, a combination of all three fields. Topping the charts in terms of federal funding and initiatives, these three fields meant that some Canadian women, inferior to white men but superior to Indian men and women, could secure and expand their roles noticeably, at least in departments dealing with Indians. It is significant, for example, that in 1958, our first (and until the 1990s only) female minister of Indian Affairs (Immigration and Citizenship), Ellen Fairclough, also became the first female cabinet minister. Fairclough's women's rights platform, which included equal pay for equal work, apparently did not apply to Indian people. It is important to recognize the power and authority of racialized and feminized work in the 1960s.

Ethel Martens was probably more a part of a burgeoning international development field than she was Indian Health Services or education, and the CHR program was her attempt to marry the three. In 1960, she undertook a three-month World Health Organization travelling fellowship, where she studied health projects among Indigenous peoples that aimed to “help” the Indian to “adjust” to “his environment” in south-western United States, Mexico, Guatemala and Peru.⁹⁹ This work located sanitation as one of the “primary problems with which all the developing areas of the world are faced.” In Canada, she recognized that standards in “housing, living conditions

⁹⁹ In her comparative work on a similar program in Mexico, it is clear that Martens was partial to Mexican programming, which involved all government agencies cooperatively worked in the area, as opposed to the situation in Canada, in which Indian services were relegated to simply Indian Affairs or Health Canada. Martens was also involved in the Navajo Cornell Field Health Project which trained Navajo women as health workers, and learned about a program of “Sanitation aides” in Alaska.

and health habits” in Indigenous communities were well below the average level of other Canadian communities, and were reflected in high infant mortality rates and she argued that this resulted in “some lack of social acceptance of Indians and Eskimos by other Canadians.”¹⁰⁰

Martens’ practical response to these issues was to work through the nation, the federal departments of Health and Welfare and Indian Affairs. Like others, she believed that a particular history of dependency had caused deplorable living conditions on reserves and in northern communities. She, however, identified the roots of this dependency, named it “paternalism” and located its source in federal Indian policy. Ideally, the CHR program was conceived of as an attempt to resist the top-down ideology of Medical Services and, in the words of Ethel Martens, the “paternalism” of the Department of Indian Affairs.¹⁰¹ In her view, “participation by the native people in solving their own health problems is an effective means towards solution of such problems.” For this reason, she continued, and

because there are insufficient numbers of professional health personnel to cover all Eskimo and Indians communities, because there is need for trained native persons to help bridge the cultural gap between professional health personnel from one culture working with those from another culture, and because often there is greater acceptance of a member of one’s own ethnic group rather than a member of an “outside” ethnic group when changes are promoted, it is planned that native health workers will be trained as Nurses’ Aides and Sanitation Aides to be employed in Eskimo and Indian communities according to need. A few Dental Aides will be employed to assist Dentists.¹⁰²

¹⁰⁰ RG 29, Volume 2705, File 804-4-2 pt. 1, “Self-help for Canadian Indians” Ethel G. Martens, *International Journal of Health Education*.

¹⁰¹ RG 29, Volume 2709, File 803-3-1 pt. 1, Martens, “Planning and Implementation of A Health Programme.”

¹⁰² RG 29, Volume 2705, File 804-4-2 pt. 1, “Native Health Worker Programme Indian and Northern Health Services.

In explaining the program to others, Martens outlined the position of the Community

Health worker as such:

- 1) The Community Health Workers must start out slowly and let people accept them in their role.
- 2) They are to work with the people of the community and not for them.
- 3) They are not sanitary inspectors but teachers of basic sanitation practices.
- 4) They do not tell or order people to do anything
- 5) As their job is one of persuasion and not dictation – it will take a long time before the results will show (A slow, steady, solid program is better than a dictated one).

Is there a gender politics to Martens' self-help plan? Yes, but it was so integrated into the philosophy of the program and work of CHRs as to be commonplace to Martens.

When Martens spoke of the “paternalism” of Indian Affairs, it was a genderless paternalism, but when she spoke of racism, her examples referred to Indian men's attempts to obtain employment. Though she likely would have been aware of equal pay for equal work legislation adopted in the late 1950s by most of the provinces and by the federal government,¹⁰³ she incorporated unequal pay and unequal work into the salary schedules and job descriptions of a new CHR program targeted at both men and women. In her program material, she included six pages of suggestions for men, and just two pages for women. The differences are remarkable.

¹⁰³ According to the 1958 Department of Labour publication *Women At Work in Canada*, “Under these laws a woman employee who considers that her rate of pay is not equal to that paid to a male fellow employee doing the same kind of work may make a complaint to the Department of Labour which administers the Act, and there is a provision for investigation of the complaint and for redress if it is well founded.” Department of Labour of Canada, *Women at Work In Canada* (Ottawa: The Queen's Printer, 1959), 70.

Table 3
Program Suggestions for Community Health Workers

**Program Suggestions for
Community Health Workers**

Visit with the nurse to plan hours of work, office space, places where you will keep material and equipment.

Start thinking about what clinics there are and when you might teach those who are waiting

Make sure your own place is in order, you may need to arrange with the nurse for some time to do this.

Go over map of the community and reread the survey you did ... you may want to put more on the map

Talk to Chief ... about your work. Remind him about the Steering Committee ... Talk with everyone ... Try to meet with Pow-Wow or Rain Dance Committees ... Make home visits to some of the older people... Have meetings with the Chief and Council ... Ask permission to invite non-Indians to come to the meeting.

**Suggested Program for
Community Health Workers (Women)**

Report to the nurse and talk about getting settled, a place for material, a desk, etc.

Talk about the training programme..., show daily programmes, share knowledge of teaching material brought back from the course.

Take time to settle personal problems at home.

Interpret work (as they see it) to the nurse, doctors and other Medical Services personnel

Talk to Chief – solicit invitations to a meeting with Chief and councilors. Set up files for material. Plan month's work with nurse – teaching in pre-natal clinics, well baby clinics and home visits with nurse and on own. Work out monthly calendar, etc. Write monthly report. Meet with Steering committee. ... Get invitations to talk to all groups.

The men's outline, as the headline reveals, did not actually specify gender and thus demonstrate how, in Martens' view, CHR work was innately and naturally men's work. It continued with five more pages of suggestions, by month, including: "see the Indian Affairs Superintendent when he is on the Reserve"; talk about fall clean-up campaign with people on the reserve, storekeepers, nurses, missionaries, R.C.M.P., Forestry; write to Zone for materials; verify that "road equipment is working"; "If IAB are planning new wells, find out from them as much as you can and offer your suggestions about location

and construction”; and “check school grounds for safety problems.” Martens uses a noticeably different language for men than for women. Men plan, build and work in the public; women report, talk and consult, or ask for invitations to consult.³⁷⁷

As we can see from these examples, Martens was as specific and as silent about class as she was about race and gender. “Help the people help themselves”³⁷⁸ was one of her favourite sayings, “Don’t tell them what to do.” Based on a general self-help model, the idea was that Indigenous people would engage as “partners not passive recipients, in what is being done to help them become healthier.”³⁷⁹ It remains an irritatingly circular argument that addressed neither the colonial order (of which Martens sat comfortably in the upper ranks) or patriarchy (which she wrote into her CHR program). At the time, Martens was, nonetheless, a very popular instructor among Aboriginal people.

Cover Girl: MSB Nurses, Modernity and Post-War Public Health

The CHR program revolved around Medical Services nurses. The Central Region (Manitoba) was initially chosen to pilot the program in part because it was considered the most cooperative in terms of Branch administration and staff.³⁸⁰ By this, it was meant that the program required the full cooperation of sympathetic field nurses. CHRs would only be hired in communities where there was a full-time nurse; nurses played a

³⁷⁷ RG 29, Volume 2704, File 804-4-1 pt. 1, Programme Suggestions for Community Health Workers, 1-6 and Suggested Programme for Community Health Workers (Women) 1-2.

³⁷⁸ RG 29, Volume 2709, File 803-3-1 pt. 1, Martens, “Planning and Implementation of A Health Programme.”

³⁷⁹ National Health and Welfare, *The Community Health Worker*, 3.

³⁸⁰ The program required the cooperation of sympathetic field nurses, but the region was also chosen because it had a large population with a high incidence of disease. Health and Welfare Canada, *Task Force*, 117.

significant role in the selection and dismissal of CHRs³⁸¹ and were the most frequently consulted about the program. During their orientation and probation periods, as well as once they were hired, CHRs worked under the supervision of the nurse, were directly responsible to them and planned their program with their “help.”³⁸² Nurses read (and sometimes wrote) CHR monthly reports and provided reports of their own on “their” CHRs.³⁸³ It is therefore worthwhile to examine CHR and nurse work in relation to each other.

³⁸¹ RG 29, Volume 2706, File 804-4-2 pt. 2, Meeting concerning the Community Health Workers Training Program, 29 March 1963. One of the concerns of CHRs in the late 1960s was that nurses could fire them at will if they could not get along, basically on the same basis as “casual workers.” RG 29, Volume 2704, File 804-4-1 pt. 2, letter to Director General, Medical Services from Adviser, Health Education, Medical Services, 11 July 1969.

³⁸² RG 29, Volume 2706, File 804-4-2 pt. 2, letter to Mr. J. Staunton, Superintendent Indian Affairs Branch, Rossville, Manitoba from Martens, 27 March, 1962, RG 29, Volume 2709, File 803-3-1 pt. 1, Martens, “Training Public Health Auxiliary Workers”, and RG 29, Volume 2706, File 804-4-2 pt. 3, General Comments – Community Health Worker Programme

³⁸³ While earlier monthly reports were anecdotal, made by both the nurse and the CHRs themselves, monthly reports became standardized over time. Standardized forms contained eight parts: *home visits* (alone and with nurse) and visits to ministers, Indian Affairs Branch etc.); *meetings* (including details on the type, subject, attendance and teaching aids used, ie blackboard, flannel board, bulletin board, models, posters etc.); *projects* (prenatal, infant care and child health programs, some housing programs including renovation and demolition, clean-up campaigns and garbage collection, powwows, nutrition classes, housekeeping and canning, passing out pamphlets, controlling the dog population, planning social and recreational events such as bingos, rummage sales, dances and gun clubs, visiting schools, running safety, dental health, head lice programs, testing wells, assessing drinking and developing solvent inhalation problems); *Teaching and teaching aids used*; *Films and filmstrips shown*; *How many people came to ask for advice?* *Explain information given*; and *Plans for the next month*. There is another form which basically outlined the correct answers to the eight sections, and raises questions if they are not the CHR’s true response. “Is attendance falling off? Check teaching aids used.” “If no visits are made to other people by the Community Health Worker, why not? Check the listed purposes for the visits.” There were also personal appraisal reports to be filled out by the nurse regarding the evaluation of the functioning of the CHR. RG 29, Volume 2711, File 804-4-X300 pt. 1, Community Health Representatives, Saskatchewan Region, Regina 1966–1978 Review of

In the post-war period, the nurse was the thoroughly modern face of the Medical Services Branch of Health and Welfare Canada. One of the largest workforces of non-Native people in Aboriginal communities, and by far the largest within Indian Health Services, nurses were also probably one of the most photographed of all Canadian women workers in the decades after the war. The picture of kindly benevolence, authoritative medicine and social and moral regulation, the nurse was the subject of a variety of films, statues, biographies, newspaper features and an entire genre of non-fiction. MSB nurses claimed both professional expertise and heroic stature by virtually running the fringe of a modern medical system for Indians. In their work and by their example, they made history by bringing modernity to Aboriginal communities across Canada.

The nurse was an integral part of a modern medical system, involving five regions subdivided into several more zones. Each region and zone had its own administrative team, the nucleus of which was a nursing supervisor trained in public health nursing who also acted as a consultant to the hospital nursing directors in her area. The beneficiaries of a golden age of expansion of health services in the 1950s,³⁸⁴ professional MSB nurses worked in Indian hospitals, nursing stations and health centres across the country. Hired

Community Health Worker Monthly Reports 1971 and RG 29, Volume 2704 File 804-4-1 pt. 1, Evaluation of Community Health Worker Report and Programme in General; and my own review of monthly CHR reports.

³⁸⁴ Nursing stations rose in number from eighteen in 1949 to forty-one in 1959; and the number of health centres increasing from thirty-seven in 1949 to 108 in 1959. Nursing stations dealt with maternity cases, childhood illness and minor accidents. They were usually staffed by a graduate nurse, a practical assistant and a fireman-labourer. Health Centres consisted of a dwelling and an office and were staffed by a nurse, who provided medical attention within the limits of her resources. Chief concerns of hers were the planning and implementing of a public health program, home visiting, educating and inoculating. Department of National Health and Welfare *Annual Reports*, 1949, 1955 and 1959.

centrally, usually in Ottawa or other cities in the south, nurses in this system were not encouraged to integrate themselves into the communities in which they worked. Their gendered influence lay in their objective “expertise” in Indian Health and their distance in class and race from the communities they served. They claimed this expertise in part through a professionalization process that had occurred earlier in the century and in part from their stature as white women in Aboriginal communities.

MSB nurses, like all professionals (including historians), were as a rule very protective of their particular expertise. It would be fair to say that the CHR program was generally and sometimes vehemently a source of anger and frustration to them. Not consulted before the program was implemented, having a supervisory role added to their already full work schedules and, as a well-defined, empirically-trained link in the hierarchy of the Branch, not entirely on board with how one could be trained and employed in the field of ‘self-help,’ MSB nurses were very clear about the subordinate position CHRs should have, not only in wage but also in stature. As one nurse stated, the “nurse in charge is given the leading role and the top responsibility in his or her area,” and warned that the zone and the region should “be on guard against inflating the value of the work of the CHW in relation to that of the PHN.”³⁸⁵

The CHR program was not the only thing that upset nurses, but was added to a long list of grievances, including unsatisfactory working conditions, shortages and problems with communication and overwork, which led to a long-standing and problematic high rate of turnover. For example, in 1959, thirteen field nurses left their posts in the Norway House and The Pas Zones alone; in 1961, seventeen more staff

³⁸⁵ RG 29, Volume 2704, File 804-4-1 pt 2, “Questionnaire on Role of Community Health workers as Seen by Field Nursing Staff,” November 1965.

members left in the same zones.³⁸⁶ It is ironic that the CHR program was envisioned to alleviate these problems. On the level of day-to-day labour, CHRs were meant to take on part of the workload of the MSB nurse, particularly her work in public health education. This was work that MSB nurses found very little time to do themselves. Moreover, most Branch nurses did not have specific Public Health training (even though they were called Public Health nurses).³⁸⁷ Explained one booklet on the CHR program, “[t]he public health nurse, especially in outlying areas, has such a wide range of demands on her time and energy that frequently she feels discouraged, especially when she experiences disappointing results in some area of her work, and/or where the excessive demands themselves serve to discourage an attempt to solve problems.”³⁸⁸ In other versions, CHRs were to supplement or facilitate MSB nurse work. A survey in 1965 of nurses working with CHRs produced illuminating reflections on the work of the CHRs in relation to nurses. Mostly they saw CHR work as (language) interpretation, home visiting,³⁸⁹ organizing clinics and Clean-Up campaigns, acting as a liaison, or continuing a program of public health “whilst [the nurse is] away from the reserve.” One explained,

³⁸⁶ High rates of turnover also, as Abramson explained, meant little development of “personal knowledge by the white personnel of the Indian people. This limits their ability to serve in selection or supervision of the community health worker, particularly when consideration of the many types of social work that are likely to accrete to the basic functions of the worker is involved.” Abramson et al, *Critical Analysis*, 11.

³⁸⁷ RG 29, Volume 2704, File 804-4-1 pt 2, “Some observations on the Community Health Worker Program” by Margaret Stott.

³⁸⁸ National Health and Welfare, *The Community Health Worker*, 1970.

³⁸⁹ While the image of the MSB nurse has her working in an undefined vast wilderness, one of her most primary tasks was to visit the domestic sphere of Indian people, where, it was hoped, she would teach about housekeeping and child care. The domestic work of IHS nurses has been interpreted less as a factor of the earlier associations of nursing with domesticity and domestic work, and more of a factor of white women’s disciplinary colonial, and scientific gaze. How could the Indigenous home, as opposed to the hospital or clinic, be the backdrop of the professionalizing nurse?

“The Community health worker is most useful as an extension of the nurse’s arm.”

Another explained, “The nurse working together with a good community health worker is like a hunter going out after game in a strange area accompanied by a good guide.

Although the guide is the employee of the hunter, getting the game is 90 % due to the guide.”³⁹⁰ This aspect of the program continued to haunt it, as nurses tended to define Community Health Representatives as “assistants” to them rather than to the community.³⁹¹

The duties of CHRs were in a very real way determined by how they fit with what was regarded as “professional work,” including that of social workers, nurses and sometimes sanitarians. For example, a report on the program made two recommendations regarding training: first, that mosquito control be included in the training, and second, that sex education (“sex hygiene”), particularly to “young newlyweds and youngsters reaching puberty,” be included in CHR training in order to deal with “the problems that result from illegitimacy and common-law marriages.”³⁹² One response to this recommendation was that mosquito control was “somewhat too technical” and that sex education was “in the main, better left to nurses.”³⁹³ Another response to the suggestion that health aides (CHR) be given training in dealing with “family problems” was that “the health aide should not get deeply involved in family

³⁹⁰ National Health and Welfare *The Community Health Worker*, 1970; and RG 29, Volume 2704, File 804-4-1 pt. 2, “Questionnaire on Role of Community Health workers as Seen by Field Nursing Staff,” November 1965.

³⁹¹ Health and Welfare Canada, *Task Force*. Review of Chevalier and Paltiel Report, 1971, p. 124.

³⁹² Abramson et al, *Critical Analysis*, 28.

³⁹³ RG 29, Volume 2706, File 804-4-2 pt. 3, letter to Regional Superintendent, Medical Services, Central Region From Zone Superintendent, Southern Manitoba Zone, J.G. Nicholas, 15 May, 1964. Re Health Aide Evaluation Study

problems since this is not the function of the health aide. If the health aide becomes involved in family problems, he may be embroiled in family situations and his effectiveness as a health educator would be greatly diminished.”³⁹⁴ The report further recommended that CHRs be taught how to administer vaccines and other parenteral (by injection) drugs. Opposition to this was justified because “health aides do not have the necessary background” and “wherever there are health aides, there are nurses and there is no need for the health aides to be involved in the administration of vaccines and other drugs.” In handwriting, someone added that “it depends on the intelligence of the CHW,” and indeed, the situation varied greatly, but it depended rather on how much power the nurse was willing to relinquish.³⁹⁵

A labour dispute in the NWT in 1965 reveals many of the issues faced by CHRs with regard to their job descriptions. Like most labour disputes involving CHRs, it was fashioned as personal, or a “conflict of personality” between nurses and the CHRs rather than a “real” labour issue. Several resignations and complaints had been made and it is significant that the primary reasons for these grievances were that the “role of the CHW in a community was not always fully understood by some Nurses and Administrators in the north, who tended to regard them as technical assistants or sanitary labourers acting under their orders, nor by some white residents,” and that “difficulties had arisen because some white leaders with the best of intentions tended to dominate and thus to frustrate local native initiative.”³⁹⁶

³⁹⁴ RG 29, Volume 2706, File 804-4-2 pt. 3, letter to medical services from Regional Superintendent, Med services, Central Region, 8 May, 1964, Re: Preliminary Report of CHWs.

³⁹⁵ Ibid.

³⁹⁶ RG 29, Volume 2709, File 804-4-2 pt. 4, Memorandum To All Regional

It is significant that when the program was envisioned, male CHRs were to report to a sanitarian (when he was in the area)³⁹⁷ rather than to the nurse. Because there were only a few sanitarians working for the Medical Services Branch in the 1960s, Martens must have envisioned male CHRs working more independently than women. Almost immediately, however, she suggested that steering committees act in absence of sanitarians. These committees were made up of the chief of the band, an Indian Affairs representative, a nurse and one member of the community who was not a member of the council or band, such as “influential private residents eg. the local missionary or resident clergyman, RCMP officer or Hudson Bay Post manager.” The purpose of the committee was to “support, encourage and guide the worker.”³⁹⁸ In the end, all CHRs were supervised by a nurse, and all functioned in relation to a committee.

In one of the promotional materials explaining the CHR program, the philosophy of self-help was illustrated by a story about the Cambridge Bay training course.

At the Cambridge Bay course no house rules were made for the men’s residence. The candidates were all Eskimos but drawn from widely diverse communities and ranged from one who was nearly illiterate to a high school graduate. At first complete chaos reigned. The men were rowdy, did not use the facilities properly (one refused to remove his parka for any reason) got drunk, did not turn up for meals or sessions, quarrelled and generally annoyed and angered each other. Finally they themselves requested they be regulated. Miss Martens’ reply was “Make your own rules.” They were taken-a-back, but, after some considerable argument, did, and much more stringent and detailed rules than anyone else would have ventured to suggest and which they themselves enforced. One of them asked Miss Martens, “Would it not have saved a lot of fuss and bother if you had made these rules in the first place?” Miss Martens’ reply was, “Possibly.” But would you men have obeyed rules made by a woman? ... For a moment her questioner

Superintendents, Medical Services From Director, Medical Services, 20 July, 1965, Re: Committee on Community Health Workers.

³⁹⁷ RG 29, Volume 2706, File 804-4-2 pt 2, to Mr. J. Staunton, Superintendent Indian Affairs Branch, Rossville, Manitoba from Martens, 27 March, 1962.

³⁹⁸ RG 29, Volume 2711, File 804-2-1, “Community Health Workers For Indian and Northern Health Services Department of National Health and Welfare,” 1961.

seemed puzzled then a sudden light dawned on him and he became delightedly enthusiastic.³⁹⁹

This story draws our attention to how the CHR program aimed to deal with recurring and gendered “chain of command” problems perceived by the MSB. The first was that patients were not obeying the rules made by women. This manifested itself also on a human resources level. In a telling write-up about the first training program, Ethel Martens noted that CHRs had expressed considerable insecurity about their jobs: “The Women asked, ‘Are we going to be asked to do the work the nurse doesn’t want to do?’ The Men wanted to know, ‘Can the nurse order us around?’⁴⁰⁰

Community health work was envisioned to be qualitatively antithetical to nursing work. Margaret Stott, a community development officer of the Indian Affairs branch explained, “The Nurse in Charge of most stations ... has come through a system where she has been expected to produce concrete results and to value such results. ... It seems likely that she might not understand the Community Health Worker’s job and might consciously or unconsciously desire results from his work which cannot be guaranteed if it is really up to the people to instigate changed health practices.”⁴⁰¹ As personnel, nurses were seen as “newcomers,” whereas CHRs were “of the community.” As such, the Community Health Representative’s job was, for nurses, most importantly to “improve the acceptance of the nurse through helping to interpret the nurse’s role.”⁴⁰²

³⁹⁹ RG 29, Volume 2704, File 804-4-1 pt 2, Medical Services Department of National Health and Welfare Community Health Workers September 1965.

⁴⁰⁰ RG 29, Volume 2704, File 804-4-1 pt. 1, Ethel G. Martens, “Training Public Health Auxiliary Workers in Community Development,” 9.

⁴⁰¹ RG 29, Volume 2704, File 804-4-1 pt. 2, “Some observations on the Community Health Worker Program” by Margaret Stott.

⁴⁰² RG 29, Volume 2704, File 804-4-1 pt. 2, “The Community Health Worker in Indian and Eskimo Communities, A New Member of the Health Team,” 7.

Indians and the Problem of Supervision

Like all Indian health programming, the CHR program inherently grew out of certain understandings that Native people were unhealthy and about why they were unhealthy. In the 1960s and 1970s, ill health in Native populations was thought in large part to be because Native people were not “following the doctor’s orders.” The vast majority of material written about Natives and Newcomers in health was and continues to be devoted to explaining the reasons for that response, and how best to remedy it. Martens’ solution, for example, was to teach Indians to “supervise” themselves. However, in the end, she still wanted to figure out how to get Indians follow orders, and like all other branches, Indigenous Community Health Representative responsibilities were organized and supervised from above. In this, the program clung to a certain body of knowledge about the social dynamics of Aboriginal communities in Canada. Because discussions circulated on the topic of men only, we must presume that male CHR supervision was the most critical issue.

Social science in the 1960s held two interconnected understandings about Native people that were key to the supervisory aspects of the CHR program. First, Indigenous communities in Canada were “subordinated” and “dependent” on government protection, depending on the “amount and type of contact the reserve has had with the white man.” Second, and as a result, there was among Indians a decline in the sense of responsibility for their own welfare. To these, Native people responded in one of two ways. First, some degree of “indigenous defensive hostility” or “deep-rooted resentment against the white man” manifested in the “adoption of a pattern of behaviour displaying ignorance, lack of confidence and initiative and over-communication of their sickness, apathy,

alcoholism and suicidal tendencies, over-communication of dependence on governmental assistance,” an emphasis on “curative medicine”⁴⁰³ and a profound suspicion for government agencies, including the staff of the Medical Services Branch. The second response was to become subordinate to “white man’s culture” to the point that “Indian people will not accept the teachings of one of their own,” especially if he is “in the pay of the white man and is attempting to spread the white man’s ideas.”⁴⁰⁴

While seemingly a genderless, “community-based” set of arguments, at the most fundamental level, this theory relied on a post-war ideal of self-respecting manliness to explain why Indian men did not obey white men. “A man must have to work to be healthy,” one CHR program evaluation explained, “for when jobs are not available depression, apathy, and the inability to secure proper food, clothing and housing act as preventatives to health and healthy conditions. ... Welfare payments tend to inhibit work incentive. They foster a dependency relationship with the Indian dependent upon the white, and this is detrimental to the Indian’s self-respect.”⁴⁰⁵ As a result, Martens explained, “[t]he Indians do not do what the doctor says just because he, a white man, said it, in fact they often deliberately do the exact opposite. They seem to think they are somehow “getting even” with him by defying him. ... Rightly or wrongly they believe they have been exploited, defrauded, tricked by half understood promises and glib double talk and whatever a white man says is automatically regarded, at least until they get to know him particularly well, as likely to be another clever trap that will leave them holding the thin and sticky end of the stick. The problem is how to get them to accept the

⁴⁰³ Health and Welfare Canada, *Task Force*, 123 and Martens, *Mexico and Canada*, 31.

⁴⁰⁴ Abramson et al, *Critical Analysis*, 10-11.

⁴⁰⁵ Ibid.

truths of modern hygiene which are not always self-evident even to the more sophisticated.”⁴⁰⁶

CHR work was measured against “productive” Indian men’s work. It was noted in 1967 that

the people are very aware that the Community Health Worker is getting a steady salary for his job so he should be doing something and doing something means something seen; for instance, cutting wood, netting fish, or making moccasins. Into this situation a new idea is brought and help becomes discussing how people can improve their own health practices; the Community Health Worker might suggest how privies can be built but he does not build the privy; he discusses what good foods are but he does not issue extra rations or see that extra rations are issued so that people may buy the good foods mentioned. And doing something for the Community Health Worker consists of walking around the reserve and talking to people explaining about germs, good foods and so on. ... [S]ince another set of values, both as to what help is and as to what work is, have been introduced into the Cree setting, the Community Health Worker may at various times experience considerable hostility towards money and doing nothing. And the attitude of many persons is – if he thinks they need privies he can build them, or supply the materials to do so.⁴⁰⁷

It was also said that the type of work CHRs did made them suspicious to communities: the work had no immediate results compared to other work like hunting and fishing;⁴⁰⁸ it relied on the “long process” of learning and involved not “doing” but “demonstrating”; it did not have the grand results that, for example, immunization had, but aimed instead to shift attitudes and behaviours.

At the same time, when it came to men doing so-called ‘women’s’ work, particularly to do with child and maternal health, there was a lot more uncertainty. For

⁴⁰⁶ RG 29, Volume 2704, File 804-4-1 pt. 2, Medical Services Department of National Health and Welfare Community Health Workers, September 1965.

⁴⁰⁷ RG 29, Volume 2704, File 804-4-1 pt 2, “Some observations on the Community Health Worker Program” by Margaret Stott.

⁴⁰⁸ Notably, hunting and fishing seasons posed problems for recruitment, and also the ‘effectiveness’ and ‘efficiency’ of CHRs.

example, during the 1970 training session for CHR's, Martens asked "How do you get the importance of prenatal clinics across? And how would a male CHW handle this?"

- should be done through the women. Male CHW's could promote discussion through their wives or Health Committee or leave it to a female CHW if there is one in the community
- talk to husbands
- talk to community aide, if there is one in the community
- letters – not too effective but might work in a few cases
- hold a meeting with the nurse and invite all pregnant women. Doesn't have to be a home visit.
- visit mothers and leave books like "Mother and Baby" with them.⁴⁰⁹

Male CHR's ability to relate to white men was of great interest to social scientists in the 1960s and was seen to damage their authenticity among their peers. "Their new image of themselves as middlemen and their new familiarity with the ways of the dominant group often makes it less satisfying for them to relate socially with their own people alone." On the other hand, it was thought that the worker could not "allow himself to become so fully identified with the whites that he increases the suspicion in which he is held by the people of the reserve. This is likely to be an infrequent occurrence, at least in the short run, since the workers do not have the education or wage level of the whites, and often have had no opportunity to develop the same social behaviours. ... They are unlikely to receive egalitarian treatment."⁴¹⁰

A problem in the Foothills region in the mid-1960s arose when a CHR was viewed as not working a full forty hours per week on health program activities. Trainees in the Cambridge Bay program had been told that they could hunt when not busy with health work (likely to entice them to the positions). One worker was "losing the respect

⁴⁰⁹ RG 29, Volume 2707, File 804-4-2 pt 7B, Community Health Worker Training Programme Fort San, Saskatchewan, 1970.

⁴¹⁰ Abramson et al, *Critical Analysis*, 12.

of the community” because his salary was unrelated to any observable work hours as a CHR. He himself “is not happy with a job which does not show any tangible results; he is becoming morose, sensitive and aware that there is much criticism in the settlement against him.” The suggestion was to cut his hours from 40 to 20 per week.⁴¹¹ Often, such stories about work patterns and local acceptance came through as arguments about modernity and whether Indians could or should access it, how and when. Automobility, for instance, was a recurring issue among CHRs and nurses. “To provide government transportation would tend to identify Indian health workers too much with other Federal employees,” one regional superintendent argued, “and they will likely cease to be, in the minds of the Indians, ‘one of them.’ What they gain in status they will lose in their value as effective ‘grass roots’ health educators.”⁴¹²

The CHR position as a standardized civil servant position was short-lived. While originally a “permanent” contract, when the program officially started, the civil service commission needed to approve positions ahead of time before CHRs could be hired. It decided contracts were to be renewed on an annual basis. By the late 1960s, there was more of a push to “relinquish direct supervision of the Community Health Workers” and have them be directly responsible to bands. By 1970, CHRs were no longer considered civil servants at all, rather, they held “personal contracts” with Medical Services. This was in effect an intermediary step before becoming band employees. A 1983–4 study established the number of CHRs at 535, 23 per cent of whom were public servants, with

⁴¹¹ RG 29, Volume 2706, File 804-4-2 pt 4, letter to Dr. Matas, Regional Superintendent, Foothills Region, From Steering Committee, 7 October, 1964.

⁴¹² RG 29, Volume 2706, File 804-4-2 pt 3, letter to Regional Superintendent, Medical Services, Central Region From Zone Superintendent, Southern Manitoba Zone, J.G. Nicholas 15 May, 1964. Re Health Aide Evaluation Study.

the remaining 76 per cent under “contribution agreements” with bands controlling conditions of employment, hours of work, vacation and sick benefits (although they were supposed to be comparable to those that applied to federal government employees in that province). Under these contracts, either party could terminate the contract at or prior to the end of any month by simple notice in writing.⁴¹³

It was the goal from the start to have the MSB relinquish direct supervision and have the Community Health program taken over – its training matters by the provinces,⁴¹⁴ and its employment matters by individual bands. Later this was called “Health Transfer” and self-government in health. From the start, there were some labour concerns to do with the negotiation of fair and equitable band contracts.⁴¹⁵ For instance, leading CHRs in Manitoba and southern Alberta voiced concerns about being able to retain public service benefits, like pensions, so that the worker was not penalized in comparison with federal government employees.⁴¹⁶ This discrepancy in wages and benefits was understood as part of a long-standing issue of gender discrimination among workers and

⁴¹³ RG 29, Volume 2711, File 804-4-X300, pt. 1, Community Health Representatives, Saskatchewan Region, Regina 1966-1978 Contract for CHRs. Band contracts raised several important questions about CHR work: for example, the involvement of nurses in the negotiation of contracts, whether CHRs could drive crown-owned vehicles for their work, who paid for insurance and who was responsible in the event of an accident, whether a contract employee was a crown employee, whether Métis people could be paid for orientation allowances, and whether band employees were by nature federal public servants.

⁴¹⁴ RG 29, Volume 2704, File 804-4-1 pt. 2, letter to Director General, Medical Services from Adviser, Health Education, Medical Services, 11 July 1969. In at least one monthly report, CHRs were involved in placing a foster child in a home, and inquiring about welfare for orphans.

⁴¹⁵ RG 29, Volume 2704, File 804-4-1 pt. 2, letter to Director General, Medical Services from Adviser, Health Education, Medical Services, 11 July 1969.

⁴¹⁶ RG 29, Volume 2704, File 804-4-1 pt. 2, Memorandum to Director General, Medical Services from Adviser, Health Education, Medical Services Re: Community Health Worker Project, 11 July, 1969, Ethel G. Martens.

was taken to task by the National Indian and Inuit Community Health Representatives Organization (NIICHRO) through a Canadian Human Rights Commission claim in 2000.⁴¹⁷

Conclusion

Any state program developed in isolation from communities was and is suspected of being part of a long history of evading treaty responsibilities, conserving federal funds and eroding services.⁴¹⁸ It is interesting, however, to look at the gendered ways such a program was envisioned, enacted and resisted. The CHR program in the early 1960s was built upon a distinct body of knowledge about Indian people, in particular, that they were dependent, suspicious, stubborn and disobedient as well as slow and uneducated. It was also built around the idea that men and women would work differently: men would plan and direct programs of health and women would report and consult about them. In addition, men were paid substantially more for the work that they did, even though both men and women worked equally as CHRs. As their increasing numbers suggest, for a

⁴¹⁷ The Canadian Human Rights Commission complaint came from the Public Service Commission. It was that the wages CHRs were paid contravened the Human Rights Act (sect. 7, 10 and 11) on the grounds of “systemic discrimination” resulting in unequal pay between men and women. At the time, it was argued that CHRs participated in “women’s work,” work that tended to be undervalued in society with respect to men’s work, and thus compensated on a different scale. The problem with the 1987 decision (besides the seemingly arbitrary date of 1980 which cuts off almost twenty years worth of CHR labour history) was that it compensated only those who had worked and were still working as public servants. As an organization, NIICHRO pursued the issue, arguing that no CHRs who worked on band contracts would benefit from this wage-parity decision. Thus, if they excluded from being compensated because they were employed by Indians, in a very real way, this was a case not only about gender but also about racial discrimination. Compensation forms, available through NIICHRO continue to be filed by the over 1000 CHRs.

⁴¹⁸ RG 29, Volume 2705, File 804-4-2 pt. 1, letter to P.E. Moore, Indian and Northern Health Services From H.M. Jones, 21 Nov, 1960.

variety of reasons, CHR work and the CHR position was feminized by both MSB staff and communities.

When I presented a version of this chapter at an interdisciplinary gathering of scholars in the field of Aboriginal health, one respondent was shocked that originally there were more male than female CHRs, suggesting the extent to which the program has become associated with women. If we are to understand ideas about what work is appropriate for women and what is appropriate for men to be socially and historically constructed, it is worthwhile to investigate this process, even and especially in patriarchal societies like post-war Canada. In the first section of this chapter, I looked at how gender and ideas about maturity, including age, dependents and marital status, factored into the CHR selection process. While gendered pairs of health workers were idealized, in the end, the refusal of the Branch to pay two CHRs instead of just one made this vision an impossibility. In the end, in terms of those who were hired, women were preferred. In the second section, I looked at the content and outline of the training program for CHRs. I also looked at how gender inequity was written into the wage structure in the early CHR program. Because supervision was considered the third leg on which the program stood, I examined the power structure of CHR supervision from Ethel Martens through the nurses and to the CHRs at the bottom of the MSB hierarchy.

Because the CHR program was in fact a branch of an imperialist system of health, it reflects the contemporary ideas about modernization, development and gender too. In practice, the early CHR program is indicative of how the departments of Indian Affairs and Health and Welfare envisioned Aboriginal labour – marginalized in terms of access to resources and professional development, under the supervision of MSB staff,

underpaid and unequally paid and overworked. Whether this labour was formulated as “bridging a gap” between non-local health professionals and the Indian populations they “served,” or as “helping people to help themselves,” a Community Health Representative’s work included federal employment in the health sector *and* community leadership. “Self-help” was about contemporary ways of dealing with inept colonial systems. The CHR program is in many ways post-war colonialism at work in Canada, as it takes its place in a long tradition of skirting root causes of ill health in Aboriginal communities such as poverty, colonial policy and institutionalization.⁴¹⁹ High skills expectations from CHRs such as cross-cultural communication, teaching skills and the ability to function within two separated and varying systems did not meet with adequate resources and appropriate remuneration. Their local leadership and skills were what got them their jobs, but it was also what positioned them in a hierarchy of MSB labour below that of a professional MSB nurse. That these nurses rarely came from Indigenous communities themselves was a point of contention which in part inspired a generation of Indigenous nurses in the 1970s to organize professionally for Indian control of Indian health.

⁴¹⁹ See for example, Mary-ellen Kelm, *Colonizing Bodies: Aboriginal Health and Healing in British Columbia, 1990-1950* (Vancouver: University of British Columbia Press, 1998), Maureen K. Lux, *Medicine That Walks: Disease, Medicine and Canadian Plains Native People, 1880-1940* (Toronto: University of Toronto Press, 2001), James B. Waldram, D. Ann Herring, and T. Kue Young, *Aboriginal Health in Canada: Historical, Cultural, and Epidemiological Perspectives* (Toronto: University of Toronto Press, 1995), Patricia Jasen, “Race, Culture, and the Colonization of Childbirth in Northern Canada,” in Veronica Strong-Boag, Mona Gleason, and Adele Perry, eds., *Rethinking Canada: The Promise of Women’s History* (Don Mills: Oxford University Press, 2002), 355–366 and John Milloy *A National Crime* (Winnipeg: University of Manitoba Press, 1999).

Chapter Five

Aboriginal Nursing History

In 1975, more than forty Aboriginal nurses assembled to hold the first conference of what would become the Registered Nurses of Canadian Indian Ancestry, or RNCIA, now the Aboriginal Nurses Association of Canada.¹ RNCIA was the first organization of Aboriginal professionals in Canada, and its original objectives were unlike any other nursing organization (see Appendix 1). The primary goals of the organization were to improve the health of Aboriginal communities and to position professional Aboriginal nurses as critical components of the Indian health field. The organization also aimed to track and represent Aboriginal people in the profession, to bring to light problems related specifically to Medical Services Branch nursing, including recruitment and retention of nurses, and to make visible the overwhelming under-representation of Aboriginal nurses in the profession. Another immediate goal of the organization was to promote health professions among Native students and improve their access to education. The founding of the organization was indeed significant not only to Aboriginal nursing history, but also to Aboriginal health history, Aboriginal labour history and Aboriginal education history. It was not a starting point for the history of Aboriginal nurses – it was a turning point.

¹ The organization has gone through a number of name changes. From 1975 to 1983, the organization was called Registered Nurses of Canadian Indian Ancestry, from 1983 to 1992, it was called Indian and Inuit Nurses of Canada, and from 1992 to the present, it has been called Aboriginal Nurses Association of Canada.

Currently, literature about RNCIA exists in two different forms. First, there is a significant but isolated collection of the organization's histories of itself. These histories outline the various efforts of Aboriginal nurses in the areas of Indian health research, community service and nursing education, but have a hagiographic style and tend to focus on individual nurse profiles somewhat removed from both the structures of and discourses on nursing, employment and political issues in the Medical Services Branch and other projects of decolonization both within and outside of nursing.² Second, RNCIA history exists in brief paragraphs in concluding chapters of books on Canadian nursing history. In these, it is discussed as a recent "special interest" development, part of a relatively recent ethnic diversification and identification in the nursing field, and characterized by an interest in health problems associated with Aboriginal people.³ In such renditions, RNCIA as a vehicle for addressing larger and longer-standing issues of racial discrimination in health service and health professions is obscured.

In addition, this pattern of writing about Aboriginal issues as bookends to a featured story follows irritating patterns in Aboriginal history writing that are ever presenting Aboriginal issues as either ancient history or new and recent, devoid of a past. In the Aboriginal nursing context, this suggests that before 1975 there was nothing.

² See, for example, Mary-Ellen Kelm and Aboriginal Nurses Association of Canada, *30 Years of Community: Aboriginal Nurses Association of Canada* (Ottawa: Aboriginal Nurses Association of Canada, 2005) and Aboriginal Nurses Association of Canada, *Aboriginal Nurses Association of Canada: Working together for quality nursing care and healing 1975-1995* (Ottawa: Aboriginal Nurses Association of Canada, 1995).

³ Kate McPherson, *Bedside Matters: The Transformation of Canadian Nursing 1900-1990* (Don Mills, ON: Oxford University Press, 1996), Alice J. Baumgart and Jenniece Larsen, *Canadian Nursing Faces the Future: Development and Change* (Toronto: The C.V. Mosby Company, 1988) and Marjorie McIntyre, Elizabeth Thomlinson, Carol McDonald, *Realities of Canadian Nursing: Professional, Practice and Power Issues*, 2nd Edition (Philadelphia: Lippincott, Williams and Wilkins, 2006).

Some historians have even celebrated Jean Goodwill, an influential Cree nurse critical to the founding of the organization, as the “first Aboriginal woman in Canada to complete her nursing training.”⁴ The way that we perceive Aboriginal nurses as historically absent is illustrative of many of the problems with Aboriginal history, particularly when it comes to labour. In most versions, Aboriginal people are said to have “transitioned” to wage labour through a process of assimilation or integration which suggests the impossibility of being Native *and* existing in the twentieth century simultaneously. For Aboriginal professionals, however, their labour history is conceived of as a single, swift moment of an individual “first.”

Stories about the “first” are indeed compelling, and I have in this research been asked numerous times: “Who was the first Native nurse?” The “first” is shorthand for the monumental achievements made by those who were dramatically underrepresented in their workplace. But the pursuit to find the first nurse seems inherently ahistorical. It relies on absence and a void of activity for the inspiration of a succession of path-breakers. It is at once both a beginning and an end of a history of Aboriginal nursing; while hinting at a past of struggle and resistance, it truncates larger contributions of Aboriginal women’s work in our history and does little to explain absence in our

⁴ Laurie Meijer Drees and Lesley McBain, “Nursing and Native Peoples in Northern Saskatchewan: 1930s to 1950s,” *The Canadian Bulletin of Medical History* 18:1 (2001): 61-2. The authors mark the date of Goodwill’s graduation as the starting point at which Aboriginal people entered the medical system as nurses. Earning her RN in 1954, Goodwill was not the first Aboriginal nurse, but she represents in many ways a generation of Aboriginal nurses in as much as a large number of people identified with her, as well as issues in Native nursing that she talked about.

constructions of the past. It is one of the ways in which we express a discomfort with Aboriginal modernity.

This chapter challenges the “absence” theory of twentieth-century Aboriginal history and will demonstrate how employment – nursing in this case – became in fact, a significant expression of post-war Indian identity. What I want to do is to think about RNCIA as one development in a longer history of Aboriginal nurses, and to use it as a channel for telling different stories about Aboriginal health and health services on the one hand and Aboriginal women, education and employment on the other.

This chapter is divided into three parts. Each section will start with RNCIA objectives and early initiatives, then work backwards to analyze the wider history that produced or inspired them. The first section will deal with the objective of the organization to “improve Indian health,” which originated from RNCIA’s immediate context of political struggle for Indian control as well as a longer historical engagement with caring for the health of Indigenous people, with the federal government and the Indian Health Branch, and with colonial imposition in the health field. The second section looks at the historical context of RNCIA’s aim to improve the recruitment and retention of Aboriginal nurses in the Medical Services Branch, specifically their critique of a pattern of hiring that supported on the one hand non-local professional labour and on the other local “support” staff. The third section puts RNCIA goals to improve access to professional education for Native people in the historical context of post-war Indian education, including limited and highly regulated access to post-secondary education, an obscure and unpredictable system of funding, the push for Bachelor of Nurse Entry to Practice and the impact this had on the professionalization of Aboriginal nurses. Instead

of moving forward through time, this chapter will move back from the 1980s to the early twentieth century. It will demonstrate change over time in the field of Aboriginal nurse history and trace a history of participation in health care, Aboriginal nurses' critique of Indian Health Service and its employment standards, and Native nurses' engagement in post-secondary Indian education. As such it will also contribute to longer histories of Indian control of Indian health, or Health Transfer (1983), Indian control of Indian education (1979) and current health human resources initiatives of Health Canada. Elsewhere, I have written about this history dating back to the turn of the century,⁵ however, here I will focus on post-war nurses, that generation of registered nurses who founded RNCIA and who formed a particular kind of gendered, professional, Indigenous labour activism in 1970s. This chapter will therefore also mostly concentrate on the history of graduate or Registered Nurses.

RNCIA and Indian Health

A Historical and Political Context

RNCIA's first objective was to improve the health of Aboriginal people, and nurses in the organization asserted that Aboriginal health professionals, especially in Medical Services Branch positions, would facilitate this goal. Interestingly, several other nursing organizations formed at about the same time and with similar goals, including the American Indian Nurses Association, the National Alaska Native North American Indian

⁵ Aboriginal Nurses Association of Canada, *Twice As Good: A History of Aboriginal Nurses* (Ottawa: Aboriginal Nurses Association of Canada, 2007).

Nurses Association,⁶ the National Council of Maori Nurses⁷ and the US-based National Black Nurses Association. Clearly, both Indigenous nurses and other nurses of colour saw in nursing a vehicle for the improving their own people's wellness and a greater share of control over their own destiny. It is important, then, to consider nursing as a site not only of colonization,⁸ but also of resistance to it. RNCIA too was a platform for Indian power politics in the 1970s but Indigenous nurses also had a longer historical experience of Indian health that made them particularly articulate observers of it.

The specific political context for an Indigenous Registered Nurse organization in Canada was the widespread acknowledgement of the limits of integration for equality and the ways integration policy infringed on treaty rights, embodied in the rejection of the 1969 White Paper by Aboriginal people. The White Paper, which proposed to terminate

⁶ RNCIA maintained ties with the American Indian Nurses Association, then struggling under the Reagan administration. The American Indian Nurses Association disbanded in 1984, but led to the founding of the National Native Alaska North American Indian Nurses Association. Aboriginal Nurses Association of Canada Records (hereafter ANAC), Registered Nurses of Canadian Indian Ancestry MARN Meeting Room, Winnipeg Manitoba 11, 12, 13 June 1982. Organizationally, the ANAC also made significant ties with provincial and national registered nurses associations, as well as feminist organizations and Aboriginal political organizations.

⁷ The Congress of Aboriginal and Torres Straight Islander Nurses (CATSIN) was founded in 1997.

⁸ For analyses of nursing and colonization, see: Dea Birkett, "The 'White Woman's Burden' in the 'White Man's Grave': The Introduction of British Nurses in Colonial West Africa," in Nupur Chaudhuri and Margaret Strobel, eds., *Western Women and Imperialism: Complicity and Resistance* (Bloomington: Indiana University Press, 1992) 177-188; Meijer Drees and McBain, "Nursing and Native People in Northern Saskatchewan," Kathryn McPherson, "Nursing and Colonization: The Work of Indian Health Services Nurses in Manitoba, 1945-1970," in Georgina Feldberg, Molly Ladd-Taylor, Alison Li and Kathryn McPherson, eds., *Women, Health and Nation: Canada and the United States since 1945* (Montreal: McGill-Queen's University Press, 2003): 223-246; and Helen Gilbert, "Great Adventures in Nursing: Colonial Discourse and Health Care Delivery in Canada's North", *Jouvert: A Journal of Postcolonial Studies* 7:2 (Winter/Spring, 2003) available at: <http://social.chass.ncsu.edu/jouvert/v7i2/gilber.htm> accessed May 2 2007.

the *Indian Act*, disintegrate treaties, dismember tribal communities and dissolve Indian status in Canada, was the latest in a long line of efforts by the federal government to solve the “Indian Problem” by integrating Native people into the mainstream population in Canada. This was at odds with Indian groups organized for the purposes of self-determination or Indian control. Indeed, Jocelyn Bruyere, one of the founders of RNCIA and a public health nurse from Opaskwayak Cree Nation, worked at the Manitoba Indian Brotherhood in various roles and worked with the Chiefs of Manitoba to develop the landmark position paper, “Wahbung, Our Tomorrows,” a response to the 1969 White Paper.⁹

Most of the goals of RNCIA had to do with gaining a central position within the Indian Health System, acting with recognized authority as consultants, gaining control over Indian health information and programming, advocating for Indian health outside of Indian Health Services and acting as a liaison between various groups, including bands, government, and other health and nursing organizations. Jean Goodwill, a Cree RN from Little Pine Saskatchewan, wrote in the 1980s: “We, the Indian people of Canada, are approaching a turning point in our history. We are actively seeking ways to govern ourselves, to set our own standards, and, ultimately to be responsible for and to learn from both our achievements and our mistakes. The association of Indian and Inuit Nurses of Canada is part of this trend.”¹⁰ As she was apt to do, Goodwill, in one phrase, crystallized the sentiments of most of her nursing colleagues and contextualized them within larger historical developments and experiences of her people. As adviser to the

⁹ Fjola Hart-Wasekeesikaw, *The Aboriginal Nurse* 15:1 (April 2000), 1, 10.

¹⁰ Jean Cuthand Goodwill, “Organized political action: Indian and Inuit Nurses of Canada,” in Alice J. Baumgart and Jenniece Larsen, eds. *Canadian Nursing Faces the Future: Development and Change* (Toronto: The C.V. Mosby Company, 1988), 501.

health minister and for many terms president of RNCIA, Goodwill was a spokesperson for Native nurses and Indian Health for many years.

Goodwill was a charismatic leader for the new organization. Hospitalized in her youth with tuberculosis, she spent several years at the sanatorium in Prince Albert where she developed an interest in nursing that grew when she became a nurse's aide for a short while in Saskatoon. She was part of the small but expanding cadre of Aboriginal people who achieved standardized nurse training in the 1950s (she graduated as an RN from the Holy Family Hospital in Prince Albert, Saskatchewan). She then worked at the Fort Qu'Appelle Indian Hospital, a very important hospital in the history of Aboriginal nurses, and then at the Indian Health Service nursing station at La Ronge. She became the executive director of the Winnipeg Indian Friendship Centre and worked for Indian Affairs in the Cultural Development section, and later worked as editor of the *Indian News* and other projects. When she helped to organize RNCIA, Goodwill was working with the Secretary of State and as a nursing consultant to the Medical Services Branch. Her career is significant to Aboriginal nursing history because, in her various capacities, she had access to information about post-secondary-educated Native people and had special abilities to locate and communicate with a group of people who had in various ways been made very small and isolated. The difficult work of organizing requires individuals with these types of connections.

Founded in the mid-1970s, RNCIA fought not only colonial wars in terms of Indian control of Indian health, but also gendered ones in terms of nurses' control over Indian health. They walked a fine line in terms of Native women's politics, and the early organization illuminates some of the ways Native women workers negotiated mainstream

feminism and interacted with larger, more formal Indian organizations. In the context of the founding of the Native Women's Association of Canada and provincially or locally organized Native women's groups and various court challenges to gender discrimination in the *Indian Act*, it is significant that, as an organization, RNCIA took a relatively silent position on women's issues. In response to suggestions that RNCIA was a feminist group, the organization maintained that it was a "professional association." Despite being founded during International Women's Year and receiving funding from the Secretary of State through its directorate's Native Women's Program, the organization elected a man as its first chairperson, the only known male nurse of Aboriginal ancestry at the time. They did so in part to send a message that they were an organization open to all people of Indian Ancestry.¹¹ The organization found that some existing (and male-dominated) Aboriginal political groups competed over health as a jurisdiction and did not support the association's efforts, with at least one "national Indian political group" blocking an early federal funding initiative.¹²

Health Care History

While this is the political context for the ANAC as an organization, there is a longer health care labour context. Indigenous people have always been active in the provision of spiritual, social, physical and mental health care. Scholarship about campaigns to prohibit traditional healing practices in Aboriginal communities, particularly in the late nineteenth century, has shown that while previously Indian medicine was understood to

¹¹ *Aboriginal Nurses Association of Canada: Working Together*, 3.

¹² Jean Cuthand Goodwill, "Indian and Inuit Nurses of Canada," *Canadian Woman Studies* 10:2, 3 (1989), 119 and Aboriginal Nurses Association of Canada, *Working Together*, 4-5.

have “died off” in the face of epidemics and the advent of “superior” biomedical approaches, it in fact was forcefully banned. The Indian Affairs Department and churches believed that ceremonies like the Potlatch, the Sun Dance, the Thirst Dance, Giveaways and Midewiwin undermined the assimilative objectives of Indian policy: they were “immoral”; they discouraged capitalism and the accumulation of private property; they were vehicles for mobilizing organized political activity; and they were seen to destabilize federal schooling of Indian children. They blurred the vision of Canada as a politically and culturally homogeneous nation. Indian medicine was targeted because for Indigenous people, worldview, ceremonial life and social, economic and political structures of the community are all connected. The repression of ceremonies – the spiritual underpinning of the Aboriginal world – was seen to be key to the transformation of Aboriginal societies. Despite being officially outlawed until the revised 1951 *Indian Act*, Indian medicine persisted, albeit underground and without widespread support.¹³ Aboriginal healers have been consulted by Natives and non-Natives alike throughout the twentieth century, and from the frustrations of the Indian Health Service it is clear that a consistent sector of the Indian population avoided Western approaches altogether and continued to seek traditional medicine.

Because of the continuance and transformation of traditional healing practices in Aboriginal communities, many of the Aboriginal women who entered health care training and professions throughout most of the twentieth century would have been familiar with it and indeed, many had been delivered by midwives, were inspired by healers and used varying approaches in their own work. In respect to historical change in Aboriginal

¹³ Katherine Pettipas, *Severing the Ties That Bind: Government Repression of Indigenous Religious Ceremonies on the Prairies* (Winnipeg: University of Manitoba Press, 1994).

medicine, as well as some of the issues faced by RNCIA nurses who dealt with diverse communities (both “progressive” and “traditional”)¹⁴ it is fair to say that most traditional healers worked outside of mainstream medical models. It is significant that the “waged” aspect of modern nursing work has not been widely taken as its distinguishing feature from traditional medicine. Rather, the epistemologies and philosophies of health and health care that influenced the creation and institutionalization of particular health systems have been central to discussions of change over time in Aboriginal health.

The definition of “nurse” was fashioned in the late nineteenth century and, through a process of professionalization with roots in Empire, whiteness and rescue, excluded not only non-Western health care providers but also those who assisted with early medical missionaries, the large number of nurse’s aides who for various reasons did not access Registered Nurse training and the even larger number of Aboriginal people working in various capacities at Canadian hospitals, clinics and nursing stations throughout the twentieth century.

The definition of “nurse” did not exclude Aboriginal women outright, however. Aboriginal women, Health Canada, Indian Affairs and bands have participated in a discussion on Aboriginal nurses and Indian health since at least the early twentieth century. When RNCIA formed, that discussion was about how increased representation in the nursing workforce and Indian control over Indian health would improve the health of Aboriginal people. However, the discussion had changed over time. From the turn of the century to about mid-century, the discussion formed around a “graduate problem” in

¹⁴ ANAC, “Community Health Nurse’s Perspective,” (extract from a presentation by Grace Vincent made at a national Nurses Workshop sponsored by Medical Services Branch, National Health and Welfare, 1984) *Indian and Inuit Nurses of Canada Newsletter* 1:1 (n.d.), 6.

Indian residential schools (too many graduates), a shortage of medical personnel, a need for public health and the value of “good home girls” to communities. In spite of the inferior education at Indian schools, by the 1910s there were a number of students who had graduated, and the department and various church organizations were trying to find new schemes to help the graduates “establish themselves” once finished school.¹⁵

Pamela White demonstrates that Indian women bore a certain responsibility for the domestic reordering, or “advancement” of Indian people, but that efforts made towards this end were not only through marriage, family and domestic discipline;¹⁶ various women’s organizations also became a critical link for Aboriginal women who wanted to continue their education.

Clubs such as the Imperial Order Daughters of the Empire, Women’s Institutes, the Young Women’s Christian Association, the Women’s Christian Temperance Union and the Women’s Auxiliary of the Anglican Church Missionary Society involved themselves in the further education of Aboriginal women. Anglican Auxiliaries were progressive, largely middle-class and Protestant church-affiliated groups who organized around issues such as temperance and prohibition, “universal” female suffrage and missionary work, but they were also concerned with female education, public health and the roles of women in society. While they most often engaged with Aboriginal people only on a philanthropic level (for example, sending clothing to reserves) and believed wholeheartedly in assimilation as a path towards equality, many encouraged post-secondary training and careers as a means towards this end. Groups offered medals,

¹⁵ Aboriginal Nurses Association of Canada, *Twice As Good*.

¹⁶ Pamela White, “Restructuring the Domestic Sphere – Prairie Indian Women on Reserves: Image, Ideology and State Policy 1880-1930,” (Ph. D. Diss, McGill University, 1987).

prizes, roses and financial and moral support to Aboriginal women taking nursing courses. They reasoned that trained Native nurses would help in missionary work, undertake leadership roles in their communities, assist in child and maternal health¹⁷ and help to combat serious tuberculosis and influenza epidemics.¹⁸ These organizations were fairly consistent not only in supporting women's training, but often in following through with support for their employment as well.¹⁹

By the post-war period, public discussion regarding Indian nurses and Indian health had changed, and was more formally undertaken by Indian Health Services and the

¹⁷ Library and Archives Canada, Record Group 10 Indian Affairs (hereafter RG 10), Volume 3199, File 504, 178, Headquarters – Correspondence Concerning the Training of Indian Girls as Nurses, 1917-1941, letter to “Indian Girls,” from Mrs. B.C. Ashcroft of the Patriotic and Missionary Board of the Ontario Woman's Christian Temperance Union, 9 October 1917 and “Announcement” by Mrs. W.C. Ashcroft, Superintendent of Work Amongst Indians, Ontario WCTU.

¹⁸ RG 10 Volume 3199, File 504, 178, correspondence, To Sir, from Lily Bool, Indian Work, British Columbia Women's Christian Temperance Union, 6 May 1919. Influenza was so bad in 1919, that the Ontario WCTU made three resolutions to assist in a 1918 general meeting: “Our Supt. of Indian work reported the conditions among the Indians as very serious especially since the ‘flu’ epidemic. Many of the mothers of families having died, in very many cases for lack of suitable nursing and medical attention. It was therefore RESOLVED that we ask the Indian Department at Ottawa to formulate some reputation to provide short terms of training for Indian girls that would prepare them for nursing amongst their own people especially as there are so many tuberculosis patients among the Indian people” also, “That we ask the government to establish sanitoriums [sic] on Indian reserves where Indian girls could be trained in nursing”; and “That we appeal to the government to [?] a dept. of Medical Inspection Indian Schools to be supervised by professional nurses.” Letter to Arthur Meyhem, Minister of the Interior, From Mrs. H.M. Detlor, Corresponding Secretary of the Ontario Woman's Christian Temperance Union, North Bay, 14 Dec 1918.

¹⁹ An excellent source of information on this type of involvement is the “Committee on Follow-Up Work Among Indian Girls of the Women's Auxiliary of the Anglican Church Missionary Society, led by Mrs. Shirley R.O. Taylor. As head of this committee, Mrs. Taylor wrote to girls who graduated from Anglican residential schools in order to inquire about their further education, home lives and work. Over three hundred ex-pupils from across Canada corresponded with her between the years 1931 and 1957. Anglican Archives of Canada, General Synod Archives, *The Living Message* (December 1931-November 1958).

Department of Indian Affairs. Officially, the department was supportive of Native nurses on the basis that they would serve the “true interests” of their own people. The following was stated in a 1946 session of the Joint Special Committee of the Senate and House of Commons to revise the Indian Act:

It is proposed to make every effort to train Indians as doctors, nurses and sick attendants wherever possible. It is felt that the true interests of the Indian will best be served when they are taking an active part in looking after their own people. This may be taken as a necessary part of the development which is essential to the well-being of the Indians. What must be done is to encourage their natural pride in their own race and customs while at the same time learning the ways of life which will enable them to live in association with the white man.²⁰

Note, however, that training doctors and nurses is the last recommendation for improved health and came after a long list of other suggestions. This means that in the mid-1940s, the training and employment of an Indigenous health care workforce was not yet equated with improving health. In the federal view, nursing joined other employment and education efforts as a way to achieve full integration and equality. The hollowness of these sentiments is apparent in its almost exclusive focus in these years on Licensed Practical Nurse and Registered Nurse Assistant training for Native women as opposed to Registered Nurse programs.

Improving and overseeing Health Service

By the twentieth century, the health services in most Indigenous communities in Canada were managed federally. In 1945, responsibility for the administration of Indian Health Services was transferred to the Department of National Health and Welfare, and from this

²⁰ Canada, Joint Special Committee, of the Senate and House of Commons Appointed to Continue and Complete the Examination of the Indian Act. Thursday June 6, 1946 Minister of National Health and Welfare, 69.

point, the system expanded considerably, buoyed by investment of the state in the health and welfare of all Canadians as well as the post-war academic and public interest in the welfare of those who were increasingly understood to be the “original” or the “oldest” Canadians.

With the expansion of the government’s role in the everyday life of all Canadians through such programs as universal health care, unemployment insurance and family allowances, Aboriginal people too were drawn closer to the state and the rest of the population. Cold War military activity and an increasing interest in resource development also led to a concomitant, if measured, investment in health services for Aboriginal people in the north. A broadly publicized tuberculosis crisis, high rates of infant mortality and hard-hitting epidemics of influenza, mumps, typhoid, measles, chickenpox and polio among Native and Inuit people as well as the appalling treatment of Aboriginal veterans – still excluded from the rights of Canadian citizenship – stimulated public interest in Aboriginal people and made Aboriginal health a going national concern in the post-war years. A proliferation of medical interest in Aboriginal people as patients is indicated by a rise in tuberculosis treatment, vaccination and x-ray surveys and studies on diet, polio and Indian Health Services itself, and health joined various other anthropological, sociological and economic studies on Native people in the post-war period.²¹ Those studies portrayed an Aboriginal population in need of management, one that was sick, unemployed and facing racial discrimination by other Canadians. Within academia, there was a shift towards the analysis of the social, economic and cultural aspects of Aboriginal communities. Technological innovation in medicine (such as x-

²¹ Hugh Shewell, *Enough to Keep them Alive’: Indian Welfare in Canada 1873–1965* (Toronto: University of Toronto Press, 2004).

rays and vaccinations) and transportation (airplane travel) meant that more surveys and studies could be performed on Aboriginal communities more effectively, and these years saw a huge expansion in reports on topics including tuberculosis, vaccination, and diet.²² Expenditures by Indian Health Services alone rose from about \$2.5 million in 1945–46 fiscal year to over \$10 million in 1950–51.²³ Many of the nurses who formed RNCIA in the mid-1970s would have witnessed the expansion and modernization of the service in the post-war period.

The Indian Health Services branch of the Health and Welfare Department was premised as a “voluntarily assumed moral obligation on the part of the government,” to serve an “obvious health need,”²⁴ as opposed to a “statutory obligation.” Its purpose was to “fit the native people for what must be, eventually, an equal place in the community at large.”²⁵ Thus service was provided only to status Indians and Inuit who could not afford to pay for it themselves. Other Aboriginal people were to consult provincial services, although the federal government ultimately desired to devolve its responsibility for registered Indians as well. Where IHS facilities did not exist, people relied on other health service and by 1950, visits to non-departmental hospitals accounted for almost triple the number treated in departmental establishments.²⁶ It is important to note that when we speak of the IHS in this period, we are looking at a minority of the treatment services accessed by Native people.

²² Mary Jane McCallum, “This Last Frontier: Isolation and Aboriginal Health,” *Canadian Bulletin of Medical History* 22:1 (2005), 103-120.

²³ Department of National Health and Welfare, *Annual Report*, 1945-6 and 1950-1.

²⁴ Department of National Health and Welfare, *Annual Report*, 1948, 40-41.

²⁵ Department of National Health and Welfare, *Annual Report*, 1949, 107.

²⁶ Department of National Health and Welfare, *Annual Report*, 1950.

In Canada, Aboriginal nurses commented broadly on both structural inequities in the health system and the inadequate services it provided to Indian people. RNCIA also focused on the problem of cultural alienation of Aboriginal patients in the health system. In response, RNCIA had, and has, a very patient-centred notion of professional nursing. The organization's work in the field of cross-cultural nursing, perhaps one of the most important developments in Aboriginal nursing in the 1980s, is significant. Cross-cultural nursing can trace its roots in part to the contemporary critique of Eurocentrism and the widespread support for multiculturalism. Cross-cultural approaches permitted a discussion of the impact of cultural difference both from the patient's perspective as well as that of the care provider, and this generation of Aboriginal nurses found in cross-cultural nursing a way of expressing and addressing many of the struggles they and their communities faced with regard to Western health care and health care providers. One Indian nurse explained in 1978:

I often wonder how much the nurses working among Indians know about – as opposed to what they think they know. More important, how many have any idea, any awareness of their own unconscious prejudices and stereotyped thinking? Whenever our people seek health care, they are vulnerable to the unconscious racism of health care workers and they suffer accordingly. It is dehumanizing and degrading to be stereotyped in this way – as any woman ought to know.²⁷

Carol Prince, who has taught cross-cultural training workshops, states that the objective of cross-cultural training is to improve the relationships between Native clients and health care providers through understanding. She finds that body language, shyness and respect has often been misunderstood by health care providers as apathy, and so, cross-cultural training is about two groups understanding each other's language and

²⁷ "Focus on Native Health," *The Canadian Nurse* 74:9 (October 1978), 8.

values and relating to each other in a meaningful way. It is not one-sided, Prince argues, but involves an examination of all different kinds of beliefs and backgrounds.²⁸ Cross-cultural care requires an understanding of illness not only within the patient's cultural context, but also within that patient's experience of colonialism and the power relationship between patients and health care providers. Marie Ross, from Indian Brook, Nova Scotia, who graduated as a registered psychiatric nurse assistant in 1949 and became a registered nurse in 1982, explains the importance of understanding Aboriginal women patients' experience, and the importance of earning their trust. "Aboriginal women often have tragic histories of betrayal by authority figures, including their own parents. Some Aboriginal women have been subjected to further betrayals by relatives, teachers, priests, ministers and others in power positions who take advantage of the weak."²⁹ Cross-cultural training paved the way for later developments in Cultural safety and Cultural competency, now considered fundamental elements in professional nursing in Canada.³⁰

Through concepts such as cross-cultural practice, *culture* and its study became integral to nursing education and work. Aboriginal nurses bore their fair share of the weight of the work of defining, teaching and practicing cross-cultural care, as a result of what Jean Goodwill called their "unique expertise." In 1978, Pauline Steiman explained:

²⁸ ANAC, Carol Prince, Nurse Profile created as part of the *Twice as Good* interview and project, 16 August, 2006.

²⁹ John Soosaar, *Daily News* [Halifax], Local News Section, February 5, 2006, 8.

³⁰ Scholars have continued to work on the concepts of cross cultural training, cultural safety and cultural competency in the field of nursing, more recently challenging if, how and to what ends these concepts engage with essentialist and fixed notions of culture. See D. Patricia Gray and Debera J. Thomas, "Critical Reflections on Culture in Nursing," *Journal of Cultural Diversity* 13:2 (Summer 2006): 76-82.

A native nurse is really a split personality. As a nurse, she must try to explain to her people what she has learned and understands of the new scientific world. To do this successfully, she must also maintain her identity as an Indian, remember and respect the psychological influences, beliefs and customs of the Native people. Our people desperately need better health care and education. The nursing profession can help us to achieve this goal if only they will continue to develop expertise in learning about the Indian people and their needs in the home and in the community.³¹

As has been argued by historians elsewhere, Indian health was conceived of and dealt with largely by non-Native people.³² Native nurses, through RNCIA have been arguing this since 1970s, and in their critique of the IHS, nurses have also articulated how this colonial system in Canada impacted Aboriginal labour and employment issues.

**“To actively develop a means of recruiting more people of Indian ancestry”:
Labour Issues and the IHS**

One of the first ANAC initiatives was to conduct a survey of Native nurses in order to identify barriers to employment faced by Aboriginal nurses in the Medical Services Branch and make recommendations on how to improve Aboriginal nurse recruitment and retention.³³ One of the key questions in the survey was, “Do you, as an **Indian nurse**

³¹ Pauline Steiman, “Caring for Indian Outpatients,” *The Canadian Nurse* 74:9 (October 1978), 40.

³² See for example Mary-Ellen Kelm, *Colonizing Bodies: Aboriginal Health and Healing in British Columbia, 1990-1950* (Vancouver: University of British Columbia Press, 1998) and Maureen K. Lux, *Medicine That Walks: Disease, Medicine and Canadian Plains Native People, 1880-1940* (Toronto: University of Toronto Press, 2001).

³³ Library and Archives Canada, Record Group R11 504, Aboriginal Nurses Association of Canada (hereafter R11 504), Volume 32, File 32-5 and ANAC, Jean Goodwill, *Survey of Native Nurses to Determine and Identify the Barriers to Employment and Retention of Native Nurses (Within Medical Services Branch of National Health and Welfare*, 17 February 1984. A random selection of one hundred nurses were asked to take part in the study, 71 responded with completed questionnaires from all parts of Canada except Newfoundland and the Northwest Territories. The largest response was from Ontario 27, Manitoba 10, Quebec and Alberta 8 each; Nova Scotia, Saskatchewan and British Columbia, 5 each, New Brunswick, Prince Edward Island and the Yukon Territory, each

feel that health services for Indian/Inuit people should be delivered by Indian/Inuit nurses?" The overwhelming response was "yes." Many cited what Jean Goodwill called the "unique expertise" of Indian nurses, including cultural and linguistic communication skills. In the survey, 55 per cent of the nurses spoke an Indigenous language as well as English or French.³⁴ Other reasons ranged from the desire to keep Native capital in Native communities to a better awareness of and a "vested interest" in the needs of Indian health as well as a better capacity to inspire trust and understanding among Indian patients.

The 1983 survey shows that many Aboriginal nurses perceived the Medical Services Branch to have poor work environments and administration practices. Nursing shortages, rapid rates of nurse turn-over and problems with communication, racism and overwork, led to many of the problems within the Indian Health Services of Indian Affairs, the Medical Services Branch of the Department of Health and Welfare and later, the First Nations and Inuit Health Branch. There were two critical labour issues affecting Aboriginal people in the Indian Health Service. The first was the unwritten rule of employment whereby white or non-local women were hired in professional positions; Native people who worked in the system were largely its "support staff," the result of concerted post-war efforts on the part of the federal government to create a para-professional labour force of Indian people. The second issue, and one which affected Native RNs specifically, was the issue of place. RNs took issue with the limited choice of where they were able to obtain positions, and the difficulties they faced when seeking

1. 50 were Status Indians, 16 non-Status Indians, 5 Métis. 48 of the 71 belonged to RNCIA.

³⁴ *Survey of Native Nurses.*

employment in their own communities. Significantly, RNCIA talked about representation in the workforce in a way that made place matter, and also revealed the ways that race and professionalization hinged on place.

Non-Local Professionals

The modernization of IHS in the post-war period involved the expansion of health studies and research and the service itself. The administrative team at IHS expanded and consolidated as well in the 1950s and included the director; a regional medical superintendent, nursing consultant and senior medical officer located at each regional headquarters (Vancouver, Edmonton, Regina, Winnipeg and Ottawa); zone superintendents (usually located at a departmental hospital) and a number of medical officers. Graduate nurses, field nurses, medical officers, surgeons, full- and part-time physicians and hundreds of others working on a fee basis joined the service in this period.³⁵ The country was divided into five regions, each of which was subdivided into zones. Each region and zone had its own administrative team, the nucleus of which was a medical superintendent, an administrative officer and a nursing supervisor who was trained in public health nursing, and also acted as a consultant to the hospital nursing directors in her area.

While the system employed surgeons, dentists and full- and part-time private physicians who dealt with patients on a fee basis, by far the main component of its staff, both ideologically and numerically, was nurses. Indian Health Service nurses were said to be the “frontline,” the “heart” of the service, working both in the “field” and in Indian

³⁵ To this was added the services of provincial Public Health Nursing Services, Red Cross and VON.

hospitals. The 1950s was the golden age of the nursing station and health centre; while the numbers of Indian hospitals did not expand considerably, the number of nursing stations rose from 18 in 1949 to 41 in 1959 and the number of health centres increased from 37 to 108 over the same period.³⁶ Nursing stations typically dealt with maternity cases, childhood illnesses and minor accidents and were usually staffed by a graduate nurse, a practical assistant and a fireman-labourer. Health centres consisted of a dwelling and an office and were staffed by a nurse, who provided medical attention within the limits of her resources. Her chief concerns were planning and implementing a public health program, home visiting, education and inoculation.³⁷

The nursing service within the Branch had expanded and modernized as a labour force as well. Since the Department of Indian Affairs' first medical officer started in 1909, the department had hired "field matrons" to supply simple remedies, to educate people and to act in case of emergency. There were also "travelling nurses" who made inspection visits to various agencies, held baby clinics and travelled to schools and homes giving advice about sanitation, diet, parenting, gardening and homemaking. In 1927 there were about 38 nurses working for Indian Health Services in Canada;³⁸ by 1949, in the Medical Services Branch alone, there were 54 graduate nurses in the field and 123 graduate nurses working in Indian hospitals.³⁹

³⁶ Department of National Health and Welfare, *Annual Report*, 1949 and 1959.

³⁷ Department of National Health and Welfare, *Annual Report*, 1955.

³⁸ Dominion of Canada, *Annual Report for the Department of Indian Affairs for the Year Ending March 31, 1927* (Ottawa: Printer to the King's Most Excellent Majesty, 1927), 10-11.

³⁹ Department of National Health and Welfare, *Annual Report*, 1949, 42.

This expansion and modernization of the IHS nursing service occurred in the absence of Aboriginal participation, as most of the nursing personnel in the Medical Services Branch were non-Aboriginal women, many of them from outside of Canada. This recruitment pattern of the Branch was indeed one of the main issues RNCIA took up when it organized. It criticized what it called the “indiscriminate employment of nurses”⁴⁰ by the Branch and especially its European recruitment efforts, arguing, “if they need to recruit from out of the country could it not be Indian Nurses from the United States where there are many Bachelor and Masters degree nurses?”⁴¹ Aboriginal nurses pointed out that non-local employment led to high rates of turnover and poorer service. Moreover, it led to the hiring, in some instances of nurses who held prejudices towards the very people they were meant to care for.⁴²

In the late 1970s and 1980s, several affirmative action policies were put in place to boost Aboriginal employment. These new policies were not in response to RNCIA, but RNCIA was certainly well aware of them, pointing to them when arguing for the need to hire more Native nurses. These included the 1979 Indian Health Policy, the *Canadian Human Rights Act* (Section 15 of the Act provided access for Aboriginal people to equal employment in the public services), the 1978 Treasury Board Policy (which called for affirmative action in hiring Indian, Inuit, Métis and non-status Indians in the public service) and a 1981 governor-in-council order that authorized Indian Affairs to restrict

⁴⁰ R11504, Volume 1, File 1-8, Madeleine Stout, “The Association of Registered Nurses of Canadian Indian Ancestry: Achievements and Future Prospects,” unpublished paper, University of Lethbridge School of Nursing April 14, 1982, 8.

⁴¹ ANAC, Speech, Jean Goodwill, in *Registered Nurses of Canadian Indian Ancestry MARN Meeting Room Winnipeg, Manitoba*, 11,12,13 June 1982, 9. All the same, they insisted that an Indian nurse attend recruitment efforts meant to deal with unbearable shortages in Indian and Northern Health Services.

⁴² “Focus on Native Health” *The Canadian Nurse* 74:9 (October 1978): 8.

recruitment and selection for positions in the Indian and Inuit Recruitment and Development Program and the Native Development Program. But these did little more than the earlier efforts of churches, the Department of Indian Affairs and the Medical Services Branch to recruit Aboriginal nurses. In 1983, of the 800 nursing positions in the Medical Services Branch, only 31, or 4 per cent, were filled by Native nurses, and none were reserved specifically for them.⁴³ Aboriginal nurses who worked in these positions found discouragement in “subtle” prejudices such as tokenism and paternalism as well as more outright discrimination, such as the MSB’s practice of discouraging members of the community from visiting the living quarters of nursing stations and the fact that nursing stations had housing units only for single nurses – a direct result of its long-standing practice of hiring non-local professional labour.⁴⁴

RNCIA’s concerns were not just the under-employment of Native nurses but also the limited opportunities for Aboriginal nurses to work in their own home communities. Their activity on this front is significant, as it illuminates the long standing issue of place in Aboriginal nurse employment. In general, only one-fifth of the nurses in Canada before 1940 worked in hospitals; eighty per cent were out in the community, working in private duty and in public health. In Canada, patterns of nursing labour took specific form when it came to Native nurses, and most of the Aboriginal graduate nurses until the 1970s found jobs in hospitals.⁴⁵

⁴³ R11504, Volume 32, File 32-5, Jean Goodwill, *Survey of Native Nurses*, 1983, 10.

⁴⁴ R11504, Volume 32, File 32-4, Registered Nurses of Canadian Indian Ancestry Survey 1983. In at least one case, housing was denied to an Aboriginal nurse on the basis that MSB staff accommodations were reserved for nurses with no families.

⁴⁵ For those interested in working among their own people, a few hospitals seem to have been more open to Native nurses. In particular, the hospitals of File Hills, Fort Qu’Appelle, Cardston and Lady Willingdon were popular options as were urban hospitals

Aboriginal registered nurses have been historically discouraged from working as community health nurses. Officially, nurses in the MSB required a post-graduate public health course, and those who held the purse strings for Aboriginal students were often unconvinced of the need for higher education for Aboriginal nurses. However, many MSB nurses did not in fact have this qualification, so we must also look to other explanations for this trend. Historically, neither the Department of Indian Affairs nor the Indian Health Service encouraged the employment of Native nurses in their own home communities, as shown by their ambivalence about colour bars in Canadian nursing schools. It is striking that in inter-departmental correspondence in the first half of the twentieth century several letters from Indian Affairs stated that while it agreed to funding, it would not accept responsibility for arranging for employment if the student completed her course.⁴⁶ Their insistence on this point is marked, particularly in comparison to contemporary efforts of missionary and women's organizations, which made this connection very clear. Indeed, for most Aboriginal nurses who had become registered nurses, explains Nora Gladstone (who attended nursing school at the Royal Jubilee Hospital for Nursing in Victoria B.C. and spent most of her career in British Columbia working at hospitals in Kitimat, Comox and Vancouver), "If I was to become a registered nurse today, I would stay at home and work among the people of the Blood Reserve. But back in the 1930s, there was no place for Native nurses on Indian reserves. For many

and sanatoria treating Aboriginal people in the south such as Ottawa Civic, St. Boniface, Winnipeg and Charles Camsell in Edmonton. Dynevor, Toronto Hospital for Incurables, St. Bartholomew's in Lytton.

⁴⁶ RG 10, Volume 3199, File 504, 178, letter to E.A.W.R. McKenzie, Indian Agent, from A.F. MacKenzie, 6 Nov, 1936.

years it was a struggle just to be responsible and to be the best in the profession I had chosen.”⁴⁷

Why was the department reluctant to commit to hiring Native women to work in the IHS? Some Indian Agents were not, but the underlying tone to most of the correspondence was that once trained, Native nurses might not be willing to nurse in their own communities once qualified;⁴⁸ that their schooling would somehow cause them to lose “affection or respect” for their own people.⁴⁹ In other versions, agents advised against returning Native women to their home communities because of a fear of so-called cultural backsliding and undesirable social and familial influences.⁵⁰ In many other cases, Aboriginal women were simply overlooked for these positions. It was assumed that medical services for Aboriginal people would be delivered by those same agents who also provided the army, the police, the education system, the missions and in many ways regulated the lives of Aboriginal people – the State and the Church.

Notably, for their own part, many Native nursing students entered into programs with the clear intent of working among their own people. This was true despite, or perhaps because of, the fact that Indian Health Services (and all services for Aboriginal people at that time, in fact) operated without consultation with Aboriginal communities. Aboriginal nurses like Theresa Paupanekis of Norway House, Manitoba, saw in nursing

⁴⁷ J. Kulig and S. Grypma, “Breaking Down Racial Barriers: Honouring Pioneer Aboriginal Nurses from the Blood Reserve,” *Alberta RN* 62:8 (Oct 2006), 16.

⁴⁸ RG 10, Volume 3199, File 504, 178, Correspondence to J.R. MacGregor Esq. Acting Indian Agent, Gore Bay, Ontario, from Asst. Deputy and Secretary, Ottawa, 10 May 1919.

⁴⁹ RG 10, Volume 3199, File 504, 178, correspondence to Mr. J.D. McLean, Asst. Deputy and Secretary, Department of Indian Affairs, from E. MacK. Dickson, Lady Superintendent, Toronto Free Hospital for Consumptives, 3 March 1921.

⁵⁰ RG 10, Volume 3199, File 504, 178, letter to the Secretary, Indian Affairs from Col. C.E. Morgan, Supt. Six Nations, 8 June 1933.

an important role in helping to improve health and living conditions for Native people.⁵¹ In an essay entitled “Why I Became a Nurse,” Mrs. Wilma Strongeagle of the Pas, who worked at St. Anthony’s Hospital in The Pas and at Fort Qu’Appelle Indian Hospital, wrote: “It was a wonderful feeling to nurse some of my people. I really felt at home ... I am now in a position where I can care for my people. To see a sick person come back to health – whether the patient is Indian nor not, is a wonderful experience.”⁵² For some women who had lost Indian status on marriage, a career in the Indian Health Services may have been seen as an opportunity to return to one’s community.⁵³ The use of one’s education for service to one’s community was for many a clear explanation for wanting to work in the IHS. For all Native nurses who were prevented from working in their communities, the unofficial policy was seen to draw apart families, resources and interests. While nursing has always been a profession loaded with gendered expectations of service, at this point it began to symbolize considerably more than that for those of Aboriginal ancestry. The service ethic became closely tied to the contemporary struggles and aspirations of Aboriginal communities.

Indian Labour

The tendency to hire non-local professional labour did not mean, however that the IHS was devoid of Indian labour altogether. In the post-war period, Aboriginal labour continued to form what Laurie Meijer Drees calls “a nearly invisible backbone and

⁵¹ “Nurse-in-Training will serve in north,” *Indian News* (January 1955), 4.

⁵² Wilma Strongeagle, “Why I Became A Nurse,” *Indian News* (October 1962), 4.

⁵³ Many of the women in 1983 Survey were funded by Indian Affairs/ but non-status, meaning that they would have lost band membership.

significant interface with the Aboriginal patients in the [IHS] system.”⁵⁴ Aboriginal support staff for the Medical Services Branch accounted for up to twenty-five per cent of its employees by the 1950s.⁵⁵

The Indian Health Service relied in every way upon the labour of Native people, such that it would be fair to say that its infrastructure relied equally on both sick and healthy aspects of Aboriginal communities prepared to use it on their own terms. “Case-finders” and “fact-finders,” who left vaccines and took x-rays, blood samples, health statistics and tubercular patients in the summer months, relied on the gathering of people for various purposes. Organized events such as Treaty Days, festivals, summer gatherings and ceremonies involved a committed community with organizing methods of their own made invisible compared to the more dominant and publicized work of health services. Case-finders found cases by depending on the regular seasonal rounds of hunting, trapping, fishing and trading. Instruction in homes, schools and churches involved the work of organizing, hosting and incorporating knowledge in meaningful ways and in many instances, the IHS relied on already established groups such as Homemakers Clubs to do this work for them. For every film, visual aid and instruction booklet, there was also the invisible work of translators and interpreters, whose work should not be underestimated. While the facilitation of communication between unilingual patients, health care providers and family members has previously gone

⁵⁴ Laurie Meijer Drees, “Training Aboriginal Nurses: the Indian Health Service in Northwestern Canada, 1939–1975,” paper delivered by special invitation to the Hannah Conference in the History of Medicine, University of Ottawa, June 2005.

⁵⁵ Department of National Health and Welfare, *Annual Report*, 1953, 34. “Supporting the medical officers and nurses were 1150 valued employees whose skills and efforts make a medical service possible. Of these 295 were Indians or Eskimos. The additions during the year included 138 positions of appropriate classifications.”

unacknowledged as transparent, invisible or as unskilled work, recent studies on the work of interpreting show that the job involves taking on multiple and sometimes conflicting roles as direct translators, informants, biomedical interpreters and patient advocates.⁵⁶ It is perhaps for this reason that each nursing station was staffed by not only a nurse, but also a nurse's aide and a caretaker, whose work was also made invisible, if crucial, to the work of the IHS nurse.

Registered Nurses have always been a notable minority among Aboriginal people working in the field of health care, especially those working at hospitals. For example, when asked if Aboriginal people were represented in all positions in her workplaces, Myrna Cruickshank responded, "No. Most were in menial jobs."⁵⁷ The IHS has historically drawn heavily on the uncertified or para-professional labour of Native people including laundry workers, cooks and cleaners, but most notably (at least for the purposes of this chapter), nurse's aides and ward aides, whose responsibilities ranged from making beds, cleaning rooms, preparing foods and trays and patient care including applying and changing dressings.

The government's commitment to educating Aboriginal people for vocational rather than professional work shows up clearly in the various post-war efforts to survey Indigenous labour. While the most well-known of these studies focus on the labour of men (the Hawthorn Report and the Lagasse Report), there were a number of smaller labour surveys done for Indian Affairs, by its personnel and targeted at certain fields of

⁵⁶ Joseph M. Kaufert and William W. Koolage, "Role Conflict Among 'Culture Brokers': The Experience of Native Canadian Medical Interpreters," *Social Science and Medicine* 18: 3 (2005), 283-286 and Joseph M. Kaufert, Robert W. Putsch and Margaret Lavalley, "Experience of Aboriginal Health Interpreters in Mediation of conflicting Values in End-of-Life Decision Making," *Circumpolar Health* 96 (1998), 44-45.

⁵⁷ Myrna Cruickshank, Personal Correspondence, 2 April, 2006.

interest. These surveys are significant for a number of reasons. For one, they are indicative of the scientific counting and management of Indigenous workers, and thus represented an interest in Aboriginal labour in a standardized way. For another, surveys were part of a pattern of social science approaches and federal surveillance in the employment of Aboriginal people. Importantly, one of the goals of Indian labour surveys was also to find out how to encourage Native people into different fields and in that respect, they are helpful in illuminating the contemporary barriers to certain jobs as they appeared to and were explained by the federal government.

One such survey on Native nurses in the Medical Services Branch was done in 1953. In the fall of 1952, H.M. Jones, the Superintendent of Welfare Services of the Department of Indian Affairs, was inspired by a statement made in parliament by Paul Martin, then head of the Department of Health and Welfare. Martin, upon being questioned about the number of Indian employees in federal hospitals, promised “[w]here possible, we employ native personnel in all ranks.”⁵⁸ In a poorly timed attempt to verify this statement, Jones asked departmental social workers to count all Indians who had undergone training, and to comment on how to attract “girls” to this type of work.⁵⁹

The survey is inconsistent and incomplete because the social workers did not canvass every Indian hospital and did not inquire about those who worked in the provincial system, however the results were entirely expected in that they reflected the

⁵⁸ Canada, *Debates of the House of Commons*, Vol III 60th Session, 21st Parliament. (Ottawa: Queen’s Printer, 1952), 2988.

⁵⁹ RG 10 Volume 8767 File 1/25-7-5 pt. 1, General Correspondence Regarding Vocational Training for Indian Nurses and Nurses Aids Throughout Canada, 1941-1952. Letter to Miss M.S. Payne, Miss B. Fortin, Miss H. Martins, Miss J. Bartlett, Mrs. A. Oddson, Miss H.M. Heseltine, Miss W.R. Broderick and Miss P.F. Grant from H.M. Jones, 13 August, 1952.

presence in the MSB of Indian labour, but only in the lowest level positions. For example, in Alberta the survey counted no Native graduate nurses, three Nurse's Aides graduates with five more in training and "several" employed as ward aides, kitchen, and laundry help in departmental hospitals.⁶⁰

Besides confirming that relatively few Aboriginal nurses worked for the department or were completing training, the survey participants also suggested why this was the case. In British Columbia, it was noted that hospitals were "reluctant" to accept Indians as students or as employees.⁶¹ In Saskatchewan, when the question of employing Indians arose, one matron replied: "Oh no, the Union wouldn't stand for it." "Large wait lists" and "careful screening" were also barriers for many students; Aboriginal students faced problems finding accommodation to attend schools; and many could not obtain the funding required to attend courses. Some also noted that the high turnover rates among Aboriginal ward and nurse's aides and the failure of some students to complete the training was because the work was often conceived of as temporary, poorly paid and without opportunity for further advancement or higher wages.

The most oft-cited justification for the low numbers of Aboriginal nursing students, however, was that Aboriginal students could not follow the appropriate discipline of nurse training and required "extra supervision" – particularly on their "off duty" time. While maintaining that there was "little discrimination" against Indians,

⁶⁰ RG 10, Volume 8767, File 1/25-7-5, pt. 1, General Correspondence Regarding Vocational Training for Indian Nurses and Nurses Aids Throughout Canada, 1941-1952. Letter to H.M. Jones, Superintendent of Welfare Services, Indian Affairs Department, from W.R. Broderick, Social Worker, 15 August, 1952.

⁶¹ RG 10 Volume 8767 File 1/25-7-5 pt. 2, General Correspondence Regarding Vocational Training for Indian Nurses and Nurses Aids Throughout Canada, 1952-1960. Letter to Indian Affairs Branch from W.S. Arneil, Indian Commissioner for B.C., 6 October 1952.

hospital administrators and social workers also argued that it was “impossible to employ Indians because of poor educational standards and low standards of behaviour and personal cleanliness.”⁶² It is significant, but not surprising, that “culture” became blurred with “behaviour” and “work habits” in ways that explained why few Indians became nurses. Culture was the thing that made Indianness and work incompatible. In British Columbia, for example, “Indian girls” were said to be “generally unreliable as hospital employees” because of their “lack of experience in accepting discipline and the fact that many of them are not interested in the work and take it because there is nothing else offered to them.”⁶³

Indeed, much of the surveying and writing about the specificities of these programs represents a certain body of knowledge about the Aboriginal vocational student and worker, her capabilities and limits and her potential in health service. These known categories were tested against and defined the so-called ‘high standard’ of nursing service.

Vocational programs were seen as a happy medium between the “discipline” of nursing school and the lack thereof of the average Aboriginal person. An earlier study done in 1949 by the Abitibi agency’s Educational Survey Committee revealed that the “problems” found in this period were not which schools would permit Aboriginal students, but which schools were best “suited” to them, as the department saw fit. Indeed, the Indian nursing student was limited by the structural arrangements and

⁶² RG 29, Volume 8767, File 1125-7-5 pt. 2, letter To Mr. H.M. Jones Superintendent of Welfare, Indian Affairs Branch from H. Margaret Heseltine, Social Worker, Regina 18 October 1952.

⁶³ RG 10, Volume 8767, File 1125-7-5 pt. 2, letter to Indian Affairs Branch from W.S. Arneil, Indian Commissioner for B.C., 6 October 1952.

programming that grew out of those assumptions about the “limited” capacities of Aboriginal “girls” to learn and to work.

By the early 1950s, nursing assistant and nursing aid courses were favoured by the department in part because they did not require full matriculation or extended years of professional training.⁶⁴ Provincially standardized Certified Nursing Assistant and Practical Nurse programs involved about three months of theory and practice, followed by six months of practical work under trained supervisors. The prerequisites for these courses were: “An interest in nursing; good health; references; Age: 18–40 years; and Grade VIII (entrance certificate).”⁶⁵ Explaining the program at St. Boniface, Ruth states,

It was a year, so you did four months of theory and eight months of practical and then you had to write a state-board exam. It was an all-day exam and there were 500 questions, and I think the minimum was 350 correct ones, and I had 448 correct. I can remember seeing this letter coming and I knew what it was because of the return address. I was nervous about opening it up but, you know, I studied

⁶⁴ The department began making inquiries as to what programs were open to train Indians as certified Nurses Aids from the late 1940s, although as the Indian Health Service was running its own uncertified programs, the department wasn't thoroughly convinced of the expenses. The Provincial School of Practical Nursing in Calgary was one of the first such schools. It originally took in young women from the armed services for a 40 week course, after which they were qualified to work in hospitals as Nurses Aides. The qualification for entrance was grade 9. But because students required an outfit of clothing, and had to provide for their own board and accommodation for part of the time, the Indian department suggested that Indian students go for apprenticeship training closer to home in hospitals which would provide them with boarding facilities. This reluctance to allow students to move for school is continued into the 1950s, as Charles Camsell was preferred to Calgary because “the problem of supervision and accommodation would be simplified if Indian girl students were attending a course in a central location.” RG 10, Volume 8767, File 1/25-7-5, pt. 1, letter to Colonel Neary, Lytton, B.C., St. George's Indian Residential school, 24 July 1949; Superintendent of Education, Training of Indians as nurses and Nurses' Helpers, by C.A.F. Clark, Educational Survey Officer, 9 August 1949 and RG 10, Volume 8767 File 1/25-7-5, pt. 1, letter to Miss W.R. Broderick, Social Worker from H.R. Jones, Superintendent Welfare Service, 25 September 1952.

⁶⁵ RG 10, Volume 8767, File 1/25-7-5, pt. 1, letter from B. Davidson, Reg. N. Inspector, ca. 1952.

really hard because I thought how much my parents put into it, I wanted to make them proud of me.⁶⁶

Especially from the mid-1950s onwards, numerous women applied for band or Indian Affairs loans to attend programs at the Vancouver Vocational Institute for Practical Nursing,⁶⁷ the Nurse's Aide Course in Calgary, the St. Boniface's school for Practical Nursing, Nursing Assistant's courses in Sudbury, Hamilton, Toronto, Kingston and London and Nurse's Aide Training at the Canadian Vocational Training Centre in Saskatoon. In the 1960s, even more of these programs opened up.

For many Aboriginal women, however, these programs were not open to them unless they had some additional, preliminary training. Probationary courses, common to all nursing education at the time, were in line with the general philosophy of the Indian Department, established early on in the twentieth century, that Indian girls were not "suited" to nursing training, but could, with additional training, time and effort, qualify for nurses aide training. It is likely that the additional preparation required of them was a deterrent for some students, since it deferred the point at which they earned their title and qualifications and the work and wages that went with them.

⁶⁶ Ruth Christie, Interview with Author, March 28, 2006.

⁶⁷ According to the *Indian News*, in 1962, the Vancouver Vocational institute had trained over 250 Indian students, and "some 20 Indian girls are trained as practical nurses each year. *Indian News* (October 1962), 8. Marjorie Cantryn was one of the first people from her reserve, the Ohiet Band in Bamsfield, British Columbia, to pursue and education and a trade. After 11 years in Residential Schools, she went to Vancouver to attend LPN training in 1955. "I never regretted that training," she stated in 1975, "It gave me a chance to work with people; especially my own people." She went on to become the president of the Coqualeetza Fellowship in Vancouver and was later the president of the provincial association and secretary and vice-president of the national organization of Friendship Centres. She was also the founding president of the Allied Indian and Métis Society, setting up a half-way house for Indian ex-inmates, and the first woman to sit on the Vancouver Police Commissioner's Board. She also sat on the board of the B.C. Association of Non-status Indians. Canada, *Speaking Together: Canada's Native Women* (Ottawa: Secretary of State, 1975), 12.

Extra probationary periods were put in terms of integration. For example, The IHS assisted in placing Aboriginal girls in short-term jobs to “provide the initial experience and helping to put the Indian on an equal starting basis with the white girl.”⁶⁸ “Equality” in this context was a flimsy façade of paternalism: many women got into RNA programs after working as nurses assistants anyway.⁶⁹

At least two programs offered training specific to Aboriginal women. The Nurse’s Aide course in Calgary included a preliminary trial period of a month or more at Charles Camsell Hospital in Edmonton to determine Native students’ “aptitude for such a course.”⁷⁰

How much extra time was required often had to do with how far north they came from. “Indian girls” from the Northwest Territories, for example, had to take a preliminary ward aide course at the Whitehorse General Hospital in the early 1950s before they qualified for the probationary program at Camsell Hospital, after which they could apply to the Nurses Aide program at Calgary. The “elementary” course at Whitehorse consisted of helping the registered nurses, feeding patients including infants,

⁶⁸ Ottawa, Indian and Northern Health Services, Directorate Report, 1960, p. 13. As cited in Meijer Drees, 18.

⁶⁹ For example, Lena Gallup, a Métis woman from Saskatchewan, also took a Nurses Assistant Course. She went to work in a nursing home in Edmonton when she was 17, recalling “That’s where I discovered an aptitude for nursing that I think many native women have.” She contracted TB, and later decided she would take nursing aide training and worked in Edmonton and Calgary. Later, she wanted to work with Indian students who came to the city for upgrading courses, and in 1975 was working for the Calgary Indian Friendship Centre supervisor and guidance counsellor for Native students. *Speaking Together*, 64-65. Beatrice Moore and Dorothy Smith, both from Hazelton, B.C., entered Vancouver Vocational Institute’s Practical Nursing Course in 1962, after having worked at Wrinch Memorial Hospital for five years. *The Indian News* (October 1962), 8.

⁷⁰ RG 10, Volume 8767, File 1/25-7-5, pt 2, “Training of Indian Girls As Nurses Aides” – course offered in Alberta, literature enclosed in a letter to Superintendent Welfare Service, from Willa R. Broderick, Social Worker, 31 October 1952.

making beds, cleaning and giving particular attention to Indian patients who had difficulty with the English language.⁷¹ During that preliminary training for the probationary training at Camsell, students worked for three to eight hours a day at fifty cents per hour, and received “one free meal daily.”⁷² The Vancouver Vocational Institute offered a similar internship program at the Coqualeetza Indian Hospital. As described by Meijer Drees, the hospital placed three students at a time for a two-month internship to gain experience in tuberculosis and pediatric nursing.

Charles Camsell Indian Hospital offered “in-house” training for patients as orderlies, attendants, x-ray and lab technicians, and nurses aides.⁷³ Many women used the time they spent as patients in Sanatoria to their advantage educationally and prepared themselves for nursing training and careers on their own.⁷⁴

Many women also trained informally as nurses’ aides during the period, while “Training on the Job” programs, or “TOJ” formalized this type of apprenticeship training. In “TOJ” schemes, the Department made contracts with employers on behalf of Native people, to place them in apprenticeship or trade training positions. The more stably funded vocational training and placement program run by Indian Affairs called the

⁷¹ RG 10, Volume 8767, File 1/25-7-5, pt. 2, letter To Indian Affairs Branch, from W.S. Arneil, Indian Commissioner for B.C., 19 February, 1954.

⁷² Ibid.

⁷³ Meijer Drees found that the “Directorate of IHS did state openly that ‘...as soon as our patients are able, they engage in rehabilitation employment around the hospital. This is carried out on a selective basis.’ Ottawa, Indian and Northern Health Services, Directorate Report, 1960, p. 44, as cited in Meijer Drees, “Training Aboriginal Nurses,” 18.

⁷⁴ Rita Gilboche, a Métis woman from Camperville, Manitoba went to Grade VIII at home, and when she was sent to a Tuberculosis Sanatorium for two years, she finished grade nine by correspondence. This experience clearly had an impact on her, as she worked as a practical nurse in Sanatoriums across the country from James Bay to Vancouver. Tuberculosis nursing became her specialty. *Speaking Together*, 68-9.

“Placement and Relocation program” also placed a fair number of Aboriginal women in LPN programs.⁷⁵ As shown in Chapter Four, the Department of Health and Welfare had a training program of its own, run from the early 1960s, for Community Health Representatives – originally the women who were trained as CHRs were called “Nurse’s Aides.”

What significance did paraprofessional certification have, if any, for the history of Aboriginal nurses? Certified courses were strongly encouraged by the department in part because licensing facilitated work off reserves and outside of Indian hospitals, which the earlier, isolated IHS programs could not, and thus were seen to facilitate larger policies of integration by bridging the two labour markets of the Indian Health Service and the provincial health departments. Second, although nurses aides critically assisted in the maintenance of the Indian Health Service hospitals, their work was couched in terms of being for their own good, learning “self-improvement” and “self-sufficiency” rather than considered “real” work in society. Third, licensed programs brought up an unexpected issue related in part to the question of segregated schooling for Aboriginal people. While the probationary programs of post-war provincially certified courses were in many ways similar to the segregation of Native students in the earlier, uncertified ward aide and

⁷⁵ For example between February and May, 1962, the Vancouver “Placement Officer” reported that Mary Squinas, Elizabeth Jonathan, Freda Hanna, Marion Dixon and Mary Aquinas were placed in Practical Nurse training at Vancouver General Hospital, Marcy Nelson was placed at Miller Bay Indian Hospital, and Vera Derrick at Prince George General Hospital. Vera, from Kitwancool, took employment as a hospital aide at the Indian and Northern Health Services Hospital at Miller Bay. RG 10, Volume 8473, File 1/23-35, pt 1, Statistical Report on the Indian Employment Placement Program 1959-1962. Placement Officer’s Worksheet for Quarter ending 28 February 1962; and RG 10, Volume 8473, File 1/23-35, pt 2, Statistical Report on the Indian Employment Placement Program: Quarterly Report for BC Region, Vancouver, ending 31 May 1962.

nurse's aide courses run for Indians at department hospitals, the department focused on the opportunities for Indians to "learn to live with the white girls"⁷⁶ as one departmental social worker argued in 1952 of the School for Nurse's Aides at Calgary. A brief scan of some of the LPN and RNA class photographs of the post-war era reveals that they were in fact quite diverse, in comparison to RN programs. Practical Nurse Marjorie Cantryn explains that her school principal advised her to go into nursing because "there were lots of ethnic groups working in hospitals." Here, he argued, she would be less subjected to discrimination than if she worked "in an office [as a secretary] where there would only be a few other Indian girls."⁷⁷

From the point of view of Aboriginal women who worked in the hospitals, work was sometimes a transition from being a patient, sometimes even a means of accessing treatment.⁷⁸ For many, work at a hospital provided access to not only cash or payment in kind,⁷⁹ but also to relatives who were patients in the hospitals. The standardization of nurse's aides courses may have improved the wages they earned, and for non-Status Indians who were not funded by bands or the department, LPN or RNA courses were sometimes chosen because it was all they or their parents could afford. Ruth Christie, from Loon Straits, attended a 12-month program at St. Boniface Hospital in Winnipeg in the 1960s. She recalls, "The reason I took LPN rather than RN was because I didn't want

⁷⁶ "Training of Indian Girls As Nurses Aides" – course offered in Alberta, literature enclosed in a letter to Superintendent Welfare Service, from Willa R. Broderick, Social Worker, date, October 31, 1952.

⁷⁷ *Speaking Together*, 12.

⁷⁸ RG 10, Volume 8767, File 1/25-7-5, pt. 1. For example, one young woman entered into a position at an Ontario sanatorium to allow her to access pneumothorax treatments.

⁷⁹ Emily Cowall Farrell and Meeka Alivaktuk, "The Work We Have Done: Relationship, Investment and Contribution The Inuit Workers at St. Luke's Hospital Pannirtuuq 1930-1972" unpublished paper, 2003, 11-12. Cowall Farrell and Alivaktuk find that hospital workers' salaries were paid by nurses through a "barter and trade system."

to be that much of a burden on my parents, you know, to provide, because I didn't have assistance like First Nations students do today. And my parents, you know, I don't think there were times when my Dad earned the amount of money they would have needed to support me." She got by during school with the help of her family: her dad gave her \$25 per month for rent while she boarded, her brother gave her a television set, she visited with brothers and cousins in the city and she got her sister's family allowance – \$8 per month for spending money; in turn, she supported her sisters when they went to school.⁸⁰

LPN education and employment were often no less intense than RN education and employment. Myrna Cruickshank recalled of LPN training, "they used to say we did three years in one year."⁸¹ When Eleanor Olson, a Cree woman from Norway House who trained in Winnipeg as an LPN in the 1950s got a job in Peguis, she was the "doctor's nurse." She travelled around with doctors doing everything from delivering babies to community health. "I was the boss!" she recalled. She did a lot of work that RNs do today. "And I had to do it," she said, "because there weren't that many nurses – Aboriginal nurses then. Not that many. There was some, but they all had their places to work."⁸²

“To develop and encourage courses in the educational system ... on Indian health”

In RNCIA's earliest study, *Barriers to Employment and Retention of Native Nurses*, the organization showed that funding, racial prejudice, inadequate secondary school preparation and social and cultural isolation at school were all factors that affected

⁸⁰ Ruth Christie, Interview with Author, March 28, 2006.

⁸¹ Myrna Cruickshank, Personal Correspondence, 2 April, 2006.

⁸² Eleanor Olson, Interview with Author, July 14, 2006.

Aboriginal nursing students. The study was followed up by numerous initiatives to support Aboriginal nursing students and professionals. The association worked tirelessly to promote nursing at career and job fairs and gathered financial support for educational bursaries for Aboriginal nursing students, including the Baxter Fellowships, Travenol Awards, the Grace Easter Memorial Scholarship and the Jean Goodwill Scholarship. Moreover, members became involved in educational programming, including the Indian and Inuit Health Careers Program (IIHC),⁸³ ACCESS programs⁸⁴ and the Native and Northern Nursing programs.⁸⁵ These programs presented a significant departure from those targeted at Aboriginal nurses in earlier decades, which, in the 1950s and 1960s, only supported nurse's aide and ward aide training for Indians.⁸⁶

⁸³ Begun in 1984 and headed by the Department of National Health and Welfare with assistance from the Indian and Inuit Nurses of Canada, the goal of the Indian and Inuit Health Careers Program "stimulate the interest of Indian and Inuit students in the health disciplines, to encourage them to choose health careers and then make it easier for them to achieve this goal." The program funded various initiatives including Native-specific programs, bursaries and scholarships and professional development. "A New Federal Program: Indian-Inuit Professional Health Career Development," *IINC Newsletter*, 1:1: 3. A major goal of the program was to provide social and cultural environments to overcome the alienation experienced by Aboriginal students in the mainstream education system.

⁸⁴ The first ACCESS program was the National Native Access Program to Nursing (NNAPN) at the University of Saskatchewan. Funded by the Medical Services Branch, this nine-week pre-nursing program was created to assist Aboriginal students in meeting admission requirements to degree-granting nursing schools.

⁸⁵ Examples include the Blue Quills/Grant MacEwan Community Diploma Nursing Program, the Inner City Nursing Project/Red River Community College, the Northern Nursing Education Program in Thompson, Manitoba/Red River Community College, the Native Health Careers Access Program/Caribou College, the Native Nurses Entry Program/Lakehead University, and the Northern Native Indian Professional Nursing Program in British Columbia.

⁸⁶ The programs sometimes struggled with competing objectives, inconsistent funding and a lack of cooperation in terms of recruitment and regulation. For example, see literature on Manitoba programs: G. Connell, R Flett and P Stewart, "Implementing Primary Health Care Through Community Control: The Experience of Swampy Cree Tribal Council," *Circumpolar Health 90: Proceedings of the 8th International Congress*

Contemporary studies on post-secondary education and Aboriginal people tend to use the word “barriers” (for example, when talking about colour bars in higher education, inadequate primary and secondary preparation, language, cultural difference and distance), as if they were easily identified, all the same and could be addressed simply once identified. “Barriers” in this context are usually framed as issues of race or development, and seldom as more structural issues of access and restriction. The barriers affecting Native nurses in the early twentieth century have now been identified, but Native nursing students are still under-represented. Lifting the overtly racial barriers has not translated to equal access. The remaining barriers are far more insidious, difficult to locate and identify the diffuse power that supports and sustains them. By looking at the tactics Native women used to access further education after federal schooling, we can historicize the barriers they faced and render their nature and power more visible.

on Circumpolar Health, Whitehorse, Yukon, May 20-25, 1990 (Winnipeg, University of Manitoba Press, 1991): 44-46, E. Thomlinson, D. Gregory, & J. Larsen, “The Northern Bachelor of Nursing Program: One solution to problems in health care provision,” *Circumpolar Health 90: Proceedings of the 8th International Congress on Circumpolar Health, Whitehorse, Yukon, May 20-25, 1990* (Winnipeg: University of Manitoba Press, 1991), 145-148, E. Thomlinson, “Northern Bachelor of Nursing Program: Issues in the Implementation of a Curriculum to Meet Community and Nursing Needs,” *Redressing the Imbalance: Health Human Resources in Rural and Northern Communities: Proceedings from a Conference Hosted by the Northern Health Human Resources Research Unit, Thunder Bay, Ontario, October 21-24, 1993* (Thunder Bay, On: Lakehead University Centre for Northern Studies, 1995), 489-95, David Gregory, Mary Jane L. McCallum, Karen R. Grant and Brenda Elias, “Self-Determination and the Swampy Cree Tribal Council: A Case Study Involving Nursing Education in Northern Manitoba,” paper presented at the Manitoba First Nations Centre for Aboriginal Health Research, Health Services Research Project Symposium, March 2006, Opaskwayak Cree Nation and David Gregory, Mary Jane L. McCallum, Karen R. Grant, and Brenda Elias, “The Swampy Cree Tribal Council and Aboriginal Governance: A Case Study of Nursing Education in Northern Manitoba,” *Canadian Journal of Nursing Research* 40:2 (June 2008): 132-149.

Colour Bars and the Tactics of Access

Of the approximately forty registered nurses who attended the first RNCIA conference in 1975, many had become nurses between 1950s and the 1970s, although a few had also attended training in the 1930s and 1940s.⁸⁷ A time when Aboriginal nurses were barred from Canadian nursing schools was thus in living memory of many of the early members of RNCIA. So too was the opening of educational opportunities for Aboriginal people – premised significantly on a policy of ‘integration.’

There exists no history of Canadian colour bars and Native nursing in Canada, however, DIA records show that until the 1930s, only a minority of hospitals were open to receive Native students to train as nurses⁸⁸ (the department kept lists of schools that were open – not closed – to Native people). Nor does the lifting of restrictions on Aboriginal students at Canadian nursing schools exist as a specific historical moment, marked by legal statutes, celebrations, or a swift but significant change.

Many Aboriginal nurses in Canada – particularly those from territories predating and straddling the border that separates Canada and the United States – went to American nursing schools, where, as Meijer-Drees writes, they did not face the same ethnic barriers as they did in Canada.⁸⁹ Ontario WCTU activist Mrs. Ashcroft wrote as much after

⁸⁷ Of a sample of 15 at the first meeting, one had graduated in the 1930s, 3 in the 1940s, 4 in the 1950s and 6 in the 1960s and one in the 1970s.

⁸⁸ These include Toronto General Hospital Ottawa Civic, St. Boniface Hospital, the Good Samaritan Hospital in Brandon, the Toronto Hospital for Incurables, Midland General, London Hospital, McKellar General Hospital in Fort William and Nelson General Hospital, British Columbia. After surveying hospitals in Ontario in 1930, A.F. MacKenzie, Acting Assistant Deputy and Secretary of Indian Affairs found that only 15 hospitals in Ontario were “open to receive Indian girls in training as nurses.” RG 10, Volume 3199, File 504, 178, letter to Rev. T.B. R. Westgate, from A.F. MacKenzie, Acting Asst. Deputy and Secretary, 12 May 1930,

⁸⁹ Meijer Drees, “Training Aboriginal Nurses,” 6-7.

failing to get satisfactory responses from matrons of Canadian nursing schools to her appeal to have Indian girls admitted to Canadian nursing schools in 1918: “Those who have trained [as nurses] from the Brantford Reserve have trained in American Hospitals where they are glad to have them. It seems a pity that our Ontario Indian girls need to go to American Institutions ... for their education.” The failure to get any response to her requests for admittance of Indian girls to nursing schools, she wrote, “is very discouraging to the girls. I am in communication with several Hospitals and earnestly hope to find places for those willing to take such training.”⁹⁰

The only legislated aspect of Canadian colour bars vis à vis Native students was that by the *Indian Act*, Aboriginal children were required to attend federal Indian schools, and it was only by exception to this rule that they accessed public education in Canada. These schools did not have the capacity or inclination to educate students much past the sixth grade, and only a few actually provided the necessary high school courses for entrance to nursing school. Despite the fact that Indian agents held the authority to send children to school from the time of 7 years of age until they were 16, the department considered few to be capable of attaining the qualifications necessary for entrance to nursing school, namely, two or three years of high school. Those wanting to attend non-Indian high schools required the approval of both the department and the “public” high schools – many of which had colour bars of their own. For example, Jennie Neilson, of the Blood Reserve in Alberta, attended St. Paul’s residential school until 1942, when she

⁹⁰ RG 10 Volume 3199, File 504, 178. Letter “Dear Sir” from Mrs. B.C. Ashcroft, Supt Indian Work, October 1918; Memorandum, Department of Indian Affairs Canada. To Mr. Scott from Accountant, 26 May, 1919; Correspondence, To Mr. J.D. McLean, Asst. Deputy and Secretary, Dept of Indian Affairs From E. MacK. [sic] Dickson, Lady Superintendent, Toronto Free Hospital for Consumptives, 3 March 1921.

was sixteen years of age. Wanting further education, Neilson needed to attend a high school, and Cardston, Alberta, was the closest and logical choice. However, she had to go all the way to Sault Ste. Marie in northwestern Ontario to find a public high school that would accept Indian students. When she finished her exams there, she went to the St. Mary's training school for nurses, also in Sault Ste. Marie, and graduated three years later.⁹¹

Even as hospitals loosened their restrictions on non-white students, whether or not Indians were able to access training continued to be decided on a case-by-case basis. Native students needed to rely on principals and teachers for letters of reference. They would write to the superintendent of the Indian Department on the student's behalf, commenting on their character, manners, academic abilities and their state of health.⁹² These letters were requests for both permission and financial support. The department would accept or decline these requests, sometimes providing transportation costs, tuition fees, books, uniforms and an allowance for room and board. One typical example is the case of Susie, 19, whose principal made an appeal to Indian Affairs on her behalf, requesting that she be provided assistance for nursing training. The principal argued that, as a good, reliable and ambitious student with "a good constitution and health and ... a very pleasing manner," Susie was the "type that will make good and be a credit to the Indian Department." Susie's mother was widowed, and so her case was seen to be particularly strong. The superintendent R.A. Hoey informed the principal that he needed to first find "some hospital that would accept her" for training and inquire about the

⁹¹ Stacy O'Brien, "Jennie Neilsen," *Lethbridge Herald*, Monday, June 5, 2006, p. A3.

⁹² RG 10, Vol. 3199, File 504, 178, correspondence between A.F. Mackenzie, Secretary, Dept. of Indian Affairs and A.G. Hamilton, Inspector of Indian Agencies, 1935-1936.

expenses of sending her into nursing. The principal contacted the matron of the General Hospital, who agreed to accept Susie in the fall. As for the matter of expenses, she would require \$25 for uniforms and \$7.50 per month for maintenance, to which Hoey agreed. Throughout Susie's training, the Indian Department transferred financial support to the General Hospital through Susie's principal.

Funding

One of the most significant barriers to post-secondary education for Aboriginal people has been funding, and for many, the lack of funding, rather than ability or desire, prevented access to higher education. Tracing a history of post-secondary education funding in Canada is nearly impossible, as it appears to have been done largely on a case-by-case basis, decided by local authorities, Indian school principals, Indian agents and, ultimately, federal authorities, usually the superintendent of Welfare and Training at Indian Affairs.

In western Canada, a system of assistance was in place by 1917, which consisted mainly of loans for cattle, horses, farm implements, building materials, sewing machines and household furniture⁹³ – funding that continued federal schools' work of creating a domestic, agricultural settler population out of Aboriginal peoples.⁹⁴ While the DIA annual report for that year recorded a “number of other ex-pupils” attending “colleges and universities,” these students had been funded in a less than transparent manner, as indicated by the inquiries made on behalf of hopeful Native nurses. The Indian

⁹³ Department of Indian Affairs, *Annual Report 1917*, 14.

⁹⁴ Sarah Carter, *Lost Harvests: Prairie Indian Reserve Farmers and Government Policy* (Montreal-Kingston: McGill-Queen's University Press, 1990).

Department had no clear policy for funding vocational training in these years.

Superintendent of Indian Affairs Duncan Campbell Scott came closest to defining the department's position in a 1918 response to one of these inquiries:

the Department has, as you are aware, a number of institutions known as boarding and industrial schools in which children are reared and educated from the time of seven years. To those institutions we allow an annual per capital grant to cover the costs of maintenance. ... [W]ith the consent of the department we would be prepared to allow the same grant for maintenance as we do to the institutions under our direct control.⁹⁵

Scott clarified this statement in another letter in 1919: "It is of course to be understood each individual case will be considered on its merits, and full representation should be made to the Department when it is desired to take advantage of this offer."⁹⁶

The per capita grant system came out of an order-in-council, and as Milloy argues in *A National Crime* the funding system relied upon what he calls the "weakest link in the educational chain" – the ability of schools to acquire students.⁹⁷ That same system also ensured that the department would have ultimate authority over decisions made regarding Indian education. In 1928, for example, only 110 students were receiving some assistance from Parliamentary Appropriation for Indian Education.⁹⁸ According to the department's 1928 annual report, grants were to be given "to the most promising, physically fit graduates of our own schools. If church and department representatives consider a graduate worthy a grant is allowed when the bona fide intention of the pupil is evident and provided proper supervision can be secured for the period of advanced study.

⁹⁵ RG 10, Volume 3199, File 504 178, Correspondence to Mrs. Ashcroft from Scott, Deputy Superintendent General, 24 October, 1918.

⁹⁶ RG 10, Volume 3199, File 504, 178, to Lily Bool, From Scott, 5 June 1919.

⁹⁷ John Milloy, *A National Crime: The Canadian Government and the Residential School System – 1879–1986* (Winnipeg: University of Manitoba Press, 1999), 67.

⁹⁸ Department of Indian Affairs *Annual Report*, 1928, 12.

These tuition grants are continued only when satisfactory reports are received.”⁹⁹ In the mid-1930s, J.F. Woodsworth, who was not at all supportive of Native people’s access to higher education, declared, “It may be stated that the Department has never turned down a pupil who has honestly sought a higher educational background – any failure has come from the Indian, through lack of application or appreciation, or inability to satisfy prescribed standards.”¹⁰⁰

The weight placed on Indian students’ own “inabilities” is indicated in the process by which nursing students accessed funding through to the mid-twentieth century. No assurances were made at all until acceptance by nursing schools was received by the Indian agent. The Indian agent or the student’s past school principal then applied to the department with specific amounts for clothing and transportation, and, if approved, received the cheque and spent it on behalf of the student or sent it to the matron of the nursing school.¹⁰¹ The department was most amenable to funding transportation, uniforms and equipment, but would occasionally send expense money as well. The expenditure of funds to train Aboriginal health professionals continued to be minimal,

⁹⁹ Department of Indian Affairs *Annual Report* 1928, 18.

¹⁰⁰ J.F. Woodsworth, “Problems of Indian Education in Canada,” in C.T. Loram and T.F. McIlwraith, eds., *The North American Indian Today: University of Toronto – Yale University Seminar Conference Toronto, September 4-16, 1939*, (Toronto: University of Toronto Press, 1943), 270-271.

¹⁰¹ Some students’ education funds did not flow through Indian Agents or principals. One nursing student from Sheshegwaning was funded directly by the Superintendent of Indian Affairs, who sent checks through the Department Accountant to the matron of her school. “The Department will contribute to the extent of \$125.00 per annum if necessary toward the purchase of clothing, books, etc., payment to be made upon presentation of accounts certified by the Superintendent of the institution.” The funding went to the Lady Superintendent Miss E.F. Baker at St. Andrews Hospital. This was also the only case that I came across where the department actually ponied up for the entire amount of a per-capita grant for education. RG 10, Volume 3199, File 504, 178. Correspondence to Mr. Creighton, Esq. Law Clerk of the Senate, from Duncan C. Scott Deputy Superintendent General, Department of Indian Affairs 6 March 1926.

based on financial need and subject to the department's utmost priority of cost-saving. The timing of this lengthy process was critical only to the student, who, ironically, was the only one who never actually handled any money.¹⁰² The reluctance of the department to send cheques ahead of time so that the student would be prepared before arriving at school led in at least two instances to a last-minute plea to the department for the cash.¹⁰³ Funding could also cease at any point and left students very remote from the actual process.

It is important to note that Indian rights to education were not part of this discussion, or only as marginal comments by Indian officials about the "superstitions" of Indian people. It was not until the 1970s that education was spoken about broadly as a right of Aboriginal people. Before then, eligibility for education funding was mostly talked about as a moral obligation to those who had actually suffered through federal education, or as something that was provided to Indian people as a voluntary choice on the part of the federal government. Loans were approved with the stipulation "until they are able to provide for themselves," which had two important meanings in the context of Aboriginal nursing students. As Aboriginal students, they were subject to a larger policy directive that discouraged spending on Aboriginal people in favour of "self-sufficiency." This policy was related in part to dwindling federal funds for undertaking fiscal responsibility for Aboriginal people but also a way of blaming more structural problems

¹⁰² RG 10, Volume 3199, File 504, 178, Correspondence to J.R. MacGregor Esq. Acting Indian Agent, Gore Bay, Ontario, from Assistant Deputy and Secretary, Ottawa, 10 May 1919.

¹⁰³ RG 10, Volume 3199, File 504, 178, correspondence to Indian Affairs from Acting Indian Agent, Gore Bay 13 May 1919 and correspondence to J.R. MacGregor, Esq, Acting Indian Agent, Gore Bay from Assistant Deputy and Secretary, Indian Affairs, 21 July 1919.

of inequality on the “poor character” of Aboriginal people. But the goal of self-sufficiency put Aboriginal students in a double-bind. Those who were funded needed to portray both financial need on the one hand and “self-sufficiency” on the other in order to appear deserving of grants from the department. Loans could also be held against the student’s parents or other family members, and/or future treaty annuities owed to the individual or their family.

Along with funding often came added surveillance by Indian Affairs. While non-Native students normally had only to contend with matrons and perhaps their parents, Indian students also had to deal with Indian agents, social workers, the Superintendent of Welfare and Training of Indian Affairs and their former school principals, all of whom were regularly informed by the matrons of the student’s progress.

With the burden of loans and the increased surveillance from the grant system, nursing students must have felt very discouraged when they heard people say, as Irene Dejarlais did, “[you’ll] be just like the rest of the Indians and quit, wasting the government’s money.” Irene decided then and there that “I’d show him that Indians are not quitters.”¹⁰⁴ While Ann Callahan was at the Winnipeg General Hospital in training in the early 1950s, she claimed her tuition, books and \$25 dollars for spending money from Indian Affairs. She found the Indian agent, through whom her funding flowed, was not at all encouraging. When he filled out her clothing order, he told her “don’t come back ... you probably won’t make it anyway.”¹⁰⁵ A consistent and predictable policy regarding Aboriginal student funding had yet to be devised, and many Aboriginal students struggled to make ends meet.

¹⁰⁴ *Speaking Together*, 46.

¹⁰⁵ Ann Callahan, Interview with the Author, 29 March 2006.

The Indian Department did appear to be more amenable to funding Registered Nursing students by the 1950s, although it did not have a policy to provide full access to post-secondary education to Aboriginal students. From 1957 onwards, the department offered some scholarships to Aboriginal students and had a special category for those who wanted to go into nursing.¹⁰⁶ There is almost complete gender parity among the students getting awards; between 1957 and 1966, 78 women and 80 men received scholarships. The amount of the awards differed, however. The scholarship program had \$25 000 to award up to thirty-six scholarships annually valued at \$750 or \$1000 each, depending on the nature of the course. The scholarships were divided into different categories, including university courses, nursing, teacher training, commercial or technical courses at vocational school, “cultural scholarships” and those for courses in agriculture. The program reserved 8 scholarships for those in non-degree registered nursing programs, one for each administrative region of the Indian Affairs Branch.¹⁰⁷ The program’s evaluation in 1963 revealed that of a total of 119 awards to date, 33 went to university students, 21 to nurses, 17 to those in technical training courses, 33 to those in vocational training courses and 15 to those taking “cultural study.”¹⁰⁸

¹⁰⁶ “Twenty-Nine Awarded Scholarships,” *The Indian News* 6:3 (February 1963), 4.

¹⁰⁷ “Indians to Share Valuable Scholarships,” *The Indian News* 2:3 (March 1957), 1, 4.

University: 8 separate scholarships, one for each of the Indian administrative regions: to be awarded to the Indian students attaining the highest senior matriculation standing in each of the eight regions (at least 60%). These students could choose any course of study they wish except for nursing or teacher training and received \$750 or \$1000). 8 Nursing students received \$500 scholarships each; eight teachers received \$750 each, eight commercial/technical students received between \$400 and \$750; and two Agriculture students received \$750 and \$500.

¹⁰⁸ “Prove Value of Scholarships: High Percentage Successful,” *The Indian News* 6:3 (February 1963), 7.

It is interesting to compare post-secondary funding before the 1970s with access to Indian health services. Post-war health services to Native people could be accessed provided first that an individual was an Indian within the meaning of the Indian Act; second, that they followed “the Indian way of life, which for practical purposes means that he must be living on an Indian reserve or have been away from that reserve for a period of less than a year;” and third, “that the individual is financially unable to arrange appropriate care for himself. If he is able, he is expected to do so.”¹⁰⁹ By contrast, in the fields of public health, preventive medicine and health education, the department made no distinctions; its services were available to all Registered Indians on the same basis. These three criteria: registration, “an Indian way of life,” and poverty folded together colonial, cultural and class identifiers of Aboriginal people. They reflected the government’s intentions to minimize federal responsibility by absorbing Indian populations, and they served simultaneously to identify and target Indian populations as pre-modern forms.

These ideals also served to guide decisions over funding for post-secondary education. It is noteworthy that funding remained contingent on the resources of the student’s parents and/or community. One woman who trained at St. Elizabeth Hospital Training School for Nurses received money from “Indian Affairs to purchase uniforms, aprons, collars, books, stockings” because, her father was not “regularly employed and he states he is unable to help with the purchases.”¹¹⁰ The official line of the Indian Department was that it would provide full access to post-secondary funding to any status

¹⁰⁹ Department of National Health and Welfare, *Annual Report 1956*, 84.

¹¹⁰ RG 10 Volume 8767 1/25-7-5 pt. 2, letter, to Indian Affairs branch, from J.D. MacPherson, 23 September 1955.

Indian, but in practice funding for Indian students was contingent upon approval of the department, which had several explicit and invisible standards of its own. The case-by-case approach was just one expression of an unwillingness to state an explicit and uniform policy with regard to the department's responsibility to fund Indian education.

Records about nursing education do not account for most Aboriginal nurses. Many women chose not to reveal their heritage in an effort to increase their chances of acceptance and employment. Moreover, non-status Indians did not necessarily have access to loans or other funds for education and some Status Indians associated this funding with welfare reserved for those who were destitute and did not apply for it at all. All of this suggests to us that there were likely far more Native nurses during this period than we can ever know about.

Nursing training in these years was done through hospital apprenticeship programs. Myrna Cruickshank from near the Pas recalls the intensity of LPN training. "It was quite hard work on the wards," she states, "very trying at times." Students did not have too much social life. "I was on nights and had to actually run to get all tasks finished by the time day staff came on."¹¹¹ These programs were like on-the-job training, in which students worked while they went to school. Nurse Jennie Neilson from the Blood Reserve recalls that in her nurse training program in the 1940s, students would wake up at 6 a.m., work a 12-hour shift from 7 a.m. to 7 p.m. and be in bed by curfew at 10 p.m. There was little time for anything but nursing school.¹¹² Ann Callahan recalls that she had hoped her nursing training would be better than her experience of residential schooling, but found it was not all that different. Aboriginal nurses recall being the only

¹¹¹ Myrna Cruickshank, Personal Correspondence, 2 April, 2006.

¹¹² O'Brien, "Jennie Neilson."

Aboriginal students in their class, and Aboriginal students often felt lonely at school, far away from home, family and community. Ann Callahan equates nursing education in this period with residential schooling – it was equally alienating. This is ironic, as Carol Prince went to nursing for the express purpose of getting away from (Birtle) residential school.¹¹³ “There were few Aboriginal people residing in Winnipeg” when Ann Callahan went to nursing school “in the fifties,” she recalls. “If it were not for two or three families whose husbands were in the armed services, I would have been lonelier. Often times, they invited me to their homes to enjoy an aboriginal meal, music and their unique humour.”¹¹⁴ Marilyn Sark also made friends while at nursing school, some of whom she still keeps in contact with today. Nursing school was very physically demanding at this time, with a heavy load of courses and work, but, as Marilyn remarks, “we were all in the same boat.” Also, like many Aboriginal nurses in this period, she points out that she was young; she graduated from the program at the age of twenty-one.¹¹⁵

Most of the women who went into nursing school were in their late teens and early twenties, as was common among nurses at that time. It is noteworthy that, for some Aboriginal nurses in this period it was not colour bar restrictions but age restrictions that affected Aboriginal students wanting to go into nursing – several matriculated before they reached 18, and had to wait a year before being able to go to nursing school. It was for this reason that Marilyn Sark went into a university program instead, and Wilma Strongeagle spent this year working as a ward clerk.

¹¹³ ANAC, Carol Prince, Nurse Profile created as part of the *Twice as Good Project* interview and project, 16 August, 2006.

¹¹⁴ Ann Callahan, Interview with Author, 26 March, 2006.

¹¹⁵ ANAC, Marilyn Sark Nurse Profile Created as part of the *Twice As Good Project* interview and project, 6 Sept, 2006

In nursing schools, and even within the profession, there was a fairly strict policy that nurses should be unmarried, and Aboriginal nurses were no exception. Most were single or unmarried and self-supporting. Nurses at the time were to represent restrained sexuality and virtue, and married women were excluded from the profession. This went on even into the 1960s, as Rosella McKay, a Saskatchewan community health nurse recalls. As a student in the Diploma Nursing Program at the University of Saskatchewan in the early 1960s, she found the university hospital was quite “liberal,” as it didn’t judge nurses who were married and/or pregnant, and who, at this time, were refused at other schools.¹¹⁶ Many Aboriginal nurses from this period were from the prairie provinces and Ontario. Fewer were from British Columbia, and fewer still from the north.

Aboriginal RN students did take advantage of the specialization of nursing education at the time, however, including Psychiatric Nursing, Nursing Administration and Public Health.¹¹⁷ Bachelor programs grew in this period, and nurses such as

¹¹⁶ ANAC, Rosella McKay Nurse Profile Created as part of the *Twice As Good Project* interview and project, July 31, 2006.

¹¹⁷ As was common at the time, most worked for a while before taking a Public Health nursing specialty. For example, after Miss Edith Eileen Green, of Tyendinaga graduated from her RN course at the Toronto General School of Nursing, she worked in Belleville and Moose Factory before enrolling at the U of T for advanced training as a public health nurse. She completed the course in spring of 1960, and became the public health nurse in charge of the Nipissing Agency at Sturgeon Falls, Ontario. Miss Gloria Akiwenzie, of Cape Croker Reserve went to St. Mary’s School of Nursing in Kitchener, and later worked at both Seaforth Hospital and Kitchener-Waterloo Hospital before taking a Public Health Nursing course at the University of Western Ontario and was later appointed as public health nurse for Bruce County. Mrs. Kay Smallface, of Saddle Lake Reserve, graduated from RN Archer Memorial Hospital in Lamont in 1954. She worked at Charles Camsell Hospital, Edmonton and the Blood Indian Hospital, Cardston, and went to England and Germany with her husband for a year and a half. Upon her return, she was employed at Hobbema Indian Hospital, St. Paul’s Indian Residential School, Cardston and by the North Eastern Alberta Health Unit. In 1960, she interrupted this work to study at the University of Alberta on a provincial bursary, graduating with a diploma in Public Health Nursing, and returned to the Alberta Health Unit.

Mi'qmaq nurse Marilyn Sark and Métis nurse Jean Isbister Ahenakew became degree nurses in this period.¹¹⁸ According to nurse historian Kathryn McPherson, in 1962 only 148 graduated from basic baccalaureate programs, and it was heralded as a significant professional accomplishment.¹¹⁹ Marilyn Francis (Sark), of the Lennox Island Band, PEI, graduated from a four-year B. SC (Nursing) program from Mount St. Vincent University in Halifax in the early 1960s. She became a nursing instructor at Hillsborough Hospital in Charlottetown, teaching psychiatric nursing and surgical nursing until 1965. She later became the Indian health liaison worker for Lennox Island and later the band Welfare Officer. Sark was also an Indian scholarship winner. She recalled feeling like a “feather in the cap” of the Indian Department. Also in the 1960s, Mavis Brass, of Key Band, near Kamsack, Saskatchewan, obtained a five-year nursing degree at the University of Saskatchewan. She wanted to specialize in nursing administration. Jean Isbister Ahenakew was another woman who went to a university program. A Métis woman, she entered a B SC nursing program and became a Clinical and Surgical Nurse at Holy Family in Prince Albert, Saskatchewan.

Post Secondary Education and Aboriginal Nurse Professionalism

The RNCIA's first survey indicates the contemporary laddering trend in nursing education, the MSB's continuing piecemeal approach to professional development¹²⁰ and

¹¹⁸ Marilyn Sark, op cit., and ANAC, Faye North Peigan Nurse Profile Created as part of the *Twice As Good Project* interview and project, 3 August 2006.

¹¹⁹ Kathryn McPherson, *Bedside Matters: The Transformation of Canadian Nursing 1900-1990* (Don Mills, ON: Oxford University Press, 1996), 221.

¹²⁰ Meijer Drees, “Training Aboriginal Nurses,” 10.

the push for Baccalaureate “Entry to Practice” in the early 1980s.¹²¹ Because Indian Affairs post-secondary funding, or partial funding went to 68 per cent of the respondents (only slightly less than the total number of status Indian respondents¹²²), the survey is also indicative of the various developments in the 1970s, including Indian Control of Indian Education (1972), the articulation of treaty rights, the Post-Secondary Assistance Program for Indian Students and the 1979 revision to the Indian Act,¹²³ each of which provided a more predictable and theoretically universal, if still inadequate,¹²⁴ system of post-secondary funding for students. The founding of RNCIA occurred during a significant turn in Indian education initiatives, and the association worked tirelessly to put nursing on that agenda.

The pursuit of “Indian control” was critically linked to the education and employment of Aboriginal professionals, and the Registered Nurse diploma (RN) and the

¹²¹ Of the 71 nurses surveyed, two had received university degrees, 25 held post-RN degrees, and several were in either post-RN programs or Community Health Nursing In-Service (upgrading) Training Programs offered through the Medical Services Branch. The Medical Services Branch also offered Community Health upgrading courses in the “In-Service Training Program” for Community Health Nurses working for the Medical Services Branch. These courses aimed to teach the skills nurses needed to work in Aboriginal communities, however have been criticized as they were not credited anywhere but in Indian Health Services and because nurses not employed by the Branch were not permitted to attend them. Fifteen per cent specified training obtained prior to nursing, including Nurses Assistants, Practical Nurses, Community Health Representatives and Registered Psychiatric Nursing.

¹²² The high percentage of funded students may have been influenced by the selection process which included the use of DIAND post secondary students list, chiefs from some Indian communities, members of RNCIA, and the two major national conferences.

¹²³ For more on this, see Winona L. Stevenson, “Prairie Indians and Higher education: An Historical Overview, 1876 to 1977,” and Darlene Lanceley, “The Post-Secondary Assistance Program for Indian Education: The Vehicle for Change and the Voice of Opposition,” in Terry Wotherspoon, Ed., *Hitting the Books: The Politics of Educational Retrenchment* (Toronto: Garamond Press, 1991), 215-248.

¹²⁴ Respondents to the survey argued that DIAND funding as “very often inadequate,” needing to be “supplemented from other sources,” *Survey of Native Nurses*, February 17, 1984.

Baccalaureate of Nursing (BN) became a benchmark of success in the struggle for improved health status of Aboriginal people. Within the nursing profession, a distinction between the RN and the BN was entrenched and this distinction affected Aboriginal nurses in a particular way. Officially, the Medical Services Branch stipulated that only degree-educated nurses could take charge of a health centre or nursing station, or practice public health in Aboriginal communities, and to this effect, great efforts were made to support all Aboriginal nurses who wanted to obtain these educational qualifications.¹²⁵

Professional standing held significant currency. RNCIA – which was the first group of Aboriginal workers to organize professionally¹²⁶ – was open to all nurses of Canadian Indian ancestry, regardless of gender and status, as long as they were registered. Non-registered nurses of Indian ancestry, like LPNs, were invited into the organization as associate members, as were students. Most likely, these stipulations had to do with securing funding, professional standing and influence, however there was some debate on the matter of credentials. RNCIA took up the cause of “underfills” in the Medical Services Branch. These were nurses who lacked the necessary academic preparation for the positions they filled and who thus earned less and were least likely to be promoted.¹²⁷ RNCIA argued that cultural qualifications, ethnic origin and experience

¹²⁵ R11 504, Volume 2 Folder 2-10 “Field Trip to Winnipeg – May 17-21st Jean Goodwill.”

¹²⁶ Kelm and the Aboriginal Nurses Association of Canada, *Aboriginal Nurses*.

¹²⁷ Stout, “The Association of Registered Nurses of Canadian Indian Ancestry,” 6-8. While the result, the In-service Training Program system, was not exactly desirable for many Aboriginal nurses it did enhance the “chances of retaining those nurses who were dedicated to their careers but were stymied by the uncertainty of their future status within the Public Service.” “This program, also known as the Internal Creditation Program, would utilize the terms of reference for Community Health Nursing with special emphasis on the respect for client’s culture, team work, the nursing process, illness

were acceptable criteria for hiring nurses and should “parallel academia and government ‘degree-itis’ in importance, although one does not necessarily exclude the other.”¹²⁸

While the education and training of Aboriginal nurses took place largely in hospitals it is clear that preparation really began long before they entered into formal nursing programs. Early childhood experiences and the lessons learned with their families and communities sustained them in the federal system and prepared them for nurse’s training. As a child, Ann Callahan, a Cree Elder from Peepesequis First Nation, Saskatchewan, and an RN for many years in the city of Winnipeg, was helped to believe in herself as a child of creation. Well before she was sent to File Hills Residential School, she was constantly told that she was loved. For her, traditional ceremonies, visiting with elders and reconnecting with her community were vital throughout her young years and today as well.¹²⁹ Eleanor Olson, a Cree Elder from Norway House and Peguis, was also prepared in these early years for a nursing career down the road. Until she was nine, she lived a traditional lifestyle, living off the land, and was educated by her grandparents and great-grandparents, who would not permit her to attend residential school. She recalls that by the age of six, she knew all of her roles and responsibilities, which included knowing all of the names of different fish, game and birds. She knew how to fillet, how to tan, how to bead, how to cure and how to do quill work. She also had to make sure that all the moss was washed and dried for babies. Her grandmother gave her strong teachings on survival and her aunties taught her how to read. Eleanor

prevention, health promotion, continuity of care based on human development and maintenance of harmony with the goals and objectives of M.S.B.”

¹²⁸ Stout, “The Association of Registered Nurses of Canadian Indian Ancestry: Achievements and Future Prospects,” 9.

¹²⁹ Ann Callahan, Interview with Author, March 26, 2006.

worked very hard when she was young, and it was this hard work, she believes, that provided her with the work ethic she would need to undertake nursing training and a career in health care later in life.¹³⁰

These recollections contradict more popular depictions of Aboriginal family life in the 1940s and 1950s, which has been largely pathologized in religious, sociological, bureaucratic as well as economic interpretations. Many of the Aboriginal women who worked at hospitals in this period spoke their Indigenous languages as well as English. As such they provided invaluable skills communicating with patients in the hospitals. Not only did many overcome the regimes and poor quality of federal schooling, but they also experienced the discrimination and racism so prevalent in Canadian society at that time. That early education as children, therefore, was crucial to their later survival and success as nurses.

There is a way that cultural commitment consistently frames discussions of professionalism when it comes to Aboriginal nursing, especially when it comes to the ways that Aboriginal nurses are honoured. Significantly, in accounts about Aboriginal nurses, it is often the community work they do after their nursing career is over that is the focus, rather than the credentials they earned or their career itself. I think this can be significant to the methods and approaches of labour history.

Conclusion

The three principle objectives of RNCIA – to improve the health of Indian people, to recruit more nurses and to make post-secondary education more accessible – are

¹³⁰ Eleanor Olson, Interview with Author, July 14, 2006.

central themes of twentieth-century Aboriginal history. To RNCIA, ideal Indian nurses were Registered Nurses working in their own communities for the Indian Health Service. They identified with Indian patients and had an inherent capacity to serve them best. They also shouldered in large part the responsibilities of decolonizing health care in Canada.

Aboriginal nurses in the federal and provincial health care systems, however, remain underrepresented and the recruitment and retention of Aboriginal nurses a key area of research for nursing schools, federal agencies and Aboriginal communities alike, and the impetus for programs like Health Canada's new Aboriginal Health Human Resources Initiative. Nursing has arguably been one of the more innovative fields of post-secondary Aboriginal education, the proposal for a specialization in Aboriginal Health Nursing and a four-year Baccalaureate in Midwifery being the latest in over a quarter-century of work to develop nursing programs that will appeal to Aboriginal students and reflect methodologies and approaches of Aboriginal education. Alongside education, land claims and rights to resources, adequate and accessible health care for Aboriginal people has been a consistent political issue in Canada for more than sixty years, and Aboriginal nurses have been central to these discussions.¹³¹ RNCIA has mobilized widespread support for Aboriginal nurses and by insisting on an identity that combines professional labour and Indigeneity, has forced a recognition of larger issues of equitable employment on the one hand and Aboriginal education and healthcare on the other.

¹³¹ Wendy McBride and David Gregory, "Aboriginal health Human Resources Initiatives: Towards the Development of a Strategic Framework," *Canadian Journal of Nursing Research* 37: 4 (December 2005), 89-94.

In this period, being a nurse was never about just being a nurse. It was also about self-determination, good health for Aboriginal people, addressing the effects of colonization, and creating and improving a dialogue with communities, nursing associations, health organizations, the federal government and nursing schools. It was ultimately about gaining recognition as experts in both nursing and Aboriginal health.

Founded in a historical context in which the limits of integration and “equality” for Aboriginal people in Canada, as well as the infringement this integration had on treaty rights, were being more actively acknowledged, RNCIA is also indicative of efforts towards self-determination and sovereignty, or “Indian control” in the language of the time. The early organization provides an important Aboriginal nurse perspective on Indigenous labour in the Medical Services Branch at a time when Native nurses believed that that system would eventually be theirs.

Chapter Six

Aboriginal Labour and Aboriginal History

In this thesis, I argued that twentieth-century Aboriginal women's wage labour was shaped by the politics of modernity and the state. The accompanying argument to this is that histories of Native women's wage work also challenge conventional narratives of Aboriginal absence and displacement in modern Canadian history. Using four case studies on Aboriginal women domestics, the Placement and Relocation program, Community Health Representatives and nurses, I have attempted to balance the tendency in history to present Aboriginal women's lives as either managed federally to the point of invisibility or unchanging to the point of exclusion from modernity altogether. This thesis has led me to think critically about training and employment in the professional discipline of History, where ideas about modernity and the state also play a role in the exclusion and invisibility of Native people. In this conclusion, I will first review the material from the thesis and then offer some concluding remarks about Native people and historical labour as a way of proposing a new direction for research on Native women and work: race and the historical profession in Canada.

Part One

This thesis has turned on four case studies, each examining the ways that the themes of labour, modernity and the state interconnect in twentieth-century Aboriginal women's history. Chapter Two explored the state's role in encouraging Native women to work as domestic servants. It demonstrated how federal Indian schools trained and supplied domestic labour for Indian hospitals, private homes and the schools themselves. In the second part of that chapter, I examined a set of records about a domestics placement program run by the Department of Indian Affairs in the 1940s to demonstrate the state's role in recruiting, contracting and regulating the domestic labour of Native women. This program is indicative of a high demand for Indian labour in an era in which it has been otherwise conceived of as irrelevant. It is also indicative of the state's part in controlling and regulating the supply of Indian labour and the working and leisure lives of workers themselves.

From the point of view of the Department, both domestic labour and the domestic workspace were to have a disciplinary effect on Indian domestics. The need to regulate their off-work time highlights how the state perceived Native women who engaged in wage labour outside of reserves to be somehow vulnerable and in need of management. We cannot dismiss the involvement of the state in the working lives of Native women because in many cases it had profound and long-lasting impacts, not only on their lives but also on the lives of other Native women and on the maintenance of vicious images of Native women in mainstream society. The attention paid to Native women's working lives by the state also highlights the investment of the state in the process by which

Native people engage in, fail to engage in, obtain, quit and are released from employment.

The historical literature on Native labour (mostly men's), has focused on the nature, timing and effects of Native people's so-called difficult and ultimately disastrous transition to wage work after the fur trade period. The trend in historical writing in Canada in the last twenty years has been to redirect that same question in ways that understand Native labour as a strategy of cultural persistence in the face of decline and displacement, again in the post fur trade years. In this thesis, I specifically engage in Native women's domestic work in the twentieth century only, beginning around the 1940s, to demonstrate the consistent demand for Native labour and the continuing patterns of Native women's engagement in it. Native women who took part in the domestics placement program did so likely for a short period of time and many moved or returned home after one or two years. This was not just because the war was over, as historians have suggested of Canadian women's labour more generally. Rather, they did this because of the nature of that work, which was often both mobile and temporary, in spite of the Department's objectives of permanent employment. But this did not mean that Native women did not take part in domestic work in significant numbers and there exists an experience of twentieth-century domestic work among Native women – a “secret history” of it, to use Philip Deloria's term – which is worthy of further investigation. It is my hope that, buoyed by the growing literature on the racialized and gendered nature of domestic labour and on Native American women's history, we will more fairly position their labour in mid-century Aboriginal history.

There was a marked shift in post-war Indian policy from a vision of isolation for civilization on reserves to one of integration for invisibility in the broader Canadian nation. But this did not mean that the state abandoned its claim to the management of Indigenous populations. The Department of Indian Affairs' Placement and Relocation program, which I explore in Chapter Three, was one of the ways that the state attempted to use employment to enact federal goals of integration by permanent urban settlement. The Placement and Relocation program reflected a variety of mid-twentieth century imperatives and developments including tuberculosis rehabilitation programs, an emphasis on vocational skills training, the objectives of full-time permanent employment and the aims of the Indian department to dissolve itself. For Native women, hairdressing, with its relatively short and inexpensive program of study and seemingly limitless and immediate possibilities for work, was a popular option in the program.

Aboriginal hairdressers in the late 1950s and 1960s were seen to be confronting and conquering cosmic cultural extremes, extremes which were often presented as temporal and spatial in nature. They were cast as women working in extraordinary circumstances, bridging the strange and overwhelming city and generations ago (left behind, we are to presume). But they were not the only Aboriginal women engaging in modern labour, Native women chiefs, welfare officers, Homemakers Club women, crafts people, shopkeepers, musicians, restaurant owners, dressmakers, bank cashiers, stewardesses, waitresses, secretaries and stenographers, nurses and nurse's aides, and radio presenters and hosts were too. These other important fields of work for Aboriginal women deserve investigation as well.

For other women of colour, modern, urban labour like hairdressing has been considered in radically different ways than it has been for Native women. In the second part of Chapter Three, I used some of the material coming out of the field of the history of race and the beauty industry to interpret some of the differences in Aboriginal women's experiences. I focused on issues of class, entrepreneurship and the role of urban beauty cultures in expressions of Indian resistance.

In locating First Nations women in the beauty industry, I engaged with Philip Deloria's analysis of modernity, expectations and unexpectedness, which leaves questions of gender somewhat apart. An urban, technological and self-styled 'scientific' occupation which emphasized modern femininity, deportment, beauty and aesthetic, those who engaged in hairdressing at the very basic level challenged contemporary expectations about Aboriginal women. While shop ownership was impossible for most Aboriginal women in the beauty field, urban beauty culture was put to the task of Indian nation-building and sovereignty projects. A 'modelling class' sponsored by the Manitoba Indian Brotherhood and Indian princess contests show how modern moral and social norms of beauty were transposed as timeless and traditional Indian womanliness. This is not an image of Indianness that reflected change over time, but rather displacement from history itself.

It is this idea of displacement by the modern and the contemporary which informed many of the programs for 'community' and 'economic' development in the 1960s and 1970s. In the fourth chapter, I looked at the early history of one of these programs, Community Health Representatives, to illuminate how Indigenous labour was fashioned by the state as para-professional, gendered and racialized and then put to its

service as such. Forms of class, racial and gender oppression are interconnected, and in this chapter I used a combined feminist approach to the history of employment to show how ideas about unequal gendered division of labour were inscribed onto the Indian Health Service and how ideas about Indianness and whiteness informed and structured the hierarchy of Indian Health in the inaugural decade of the program.

I looked in particular at three aspects of the program: the selection of CHR candidates, the program of training and CHR supervision during and after the employee probationary period. Originally, the selection process favoured men by disqualifying women who were under the age of 35, had young children or who were unmarried. The content of the training, wage structure and supervision made CHR work appear highly gendered, but this was an imposed structure which inherently devalued women's work in relation to men's. It is ironic that it was argued that this structure was borrowed from Indigenous communities in an attempt to create non-paternalistic culturally-sensitive programming. In this case study, I showed that the labour of Indian women was also devalued within a larger, extremely hierarchical federal department of the Canadian government that delivers health services to Indigenous people, the Medical Services Branch of the Department of National Health and Welfare.

The Indian Health Service, or the Medical Services Branch, moved from Indian Affairs to National Health and Welfare in 1945, after which the Service expanded and modernized markedly. This development occurred, however, in the virtual absence of Native professionals. In the fifth chapter, I put a history of Aboriginal nurses at the centre of larger discussions about Aboriginal health, employment and education history in the twentieth century. In this chapter, I presented a history of Aboriginal nurses

starting with the formation of the Aboriginal Nurses Association of Canada (then the Registered Nurses of Canadian Indian Ancestry, or RNCIA) in 1975. I took this moment not as a signal of an entrance into history from “irrelevance” but instead as the culmination of a number of grievances Aboriginal nurses had with the state – particularly its systems of health, employment and education. 1975 was indeed an important turning point, rather than starting point for a history of Native nurses.

Working back through time, I looked at how Aboriginal nurses positioned themselves as healthcare experts of Aboriginal people, as advocates for their health, and as keen critics of the inadequate and racist Health Services available to them. The RNCIA also voiced many of the issues that Aboriginal nurses had with the Branch in terms of employment practices. In the last section of that chapter I examined some of the early initiatives in the field of education that RNCIA supported. These initiatives were meant to improve Native people’s access to higher education, funding and professional careers. It is significant that, together, both nursing and Indian ancestry were seen as a site of powerful resistance. The idealized Indian nurse was in possession of an RN degree, worked for Indian Health Services, identified ‘first hand’ with Indian patients and had an inherent capacity to serve them best. As such, importantly, Aboriginal nurses also illuminate how Native labour both influenced and was influenced by the changing politics of being Native in the last half of the twentieth century.

Part Two

There is indeed a lot that professional historians can learn from this story of labour, modernity and the state in Aboriginal women’s history. In this section I would like to

historicize the twentieth-century English Canadian historical profession using what I have learned about the Indian history of post-secondary education and labour. This conclusion is not meant to offer well-supported and decisive arguments about the profession but rather to raise and document some serious questions and concerns about it. I want to do so by problematizing the working culture of homogeneity in the Canadian historical profession, the contradistinctions between authentic Aboriginal historical figures and modern professional historians and the position of the Canadian state in Aboriginal history writing and practice. My comments will be based on informal research on Indigenous scholars and teachers of history, my own experience of the profession and an engagement in efforts to organize among Indigenous historians. Work by other historians about gender and boundary-making in the profession of history and scholarship about academic labour by Aboriginal scholars has also been helpful in situating my arguments. Unfortunately, there is not a single published study of Aboriginal people or even much on race and the historical profession in Canada that I can refer to here.

An analysis of the available secondary material must begin with work by Indigenous professional academics. Material by Native academics is often structured around questions of legitimacy, as they are constantly being asked to justify their presence in academia and to theorize their difference. To acknowledge this body of literature is to acknowledge a both a continued presence of Aboriginal people in institutions of higher learning and the myriad processes of exclusion that go on in academia. An Indigenous critique of history has a history of its own. Aboriginal scholars have challenged the ways Native people are depicted as illiterate and therefore non-historical. They have deconstructed colonial mythologies which represent

Indigenous people as static relics of an earlier stage of evolution. They have shown how Western reason, objectivity and knowledge create their opposite which then gets imposed on Aboriginal people. They have talked about how Indigenous knowledge, ethics and subjectivities are fashioned, and to what ends. They have discussed how sexism compounded with racism has left Native women academics particularly vulnerable both inside and outside of their communities. They have questioned if professional training makes Indigenous academics somehow inauthentic. In terms of academic professionalism, Aboriginal critiques have shifted from a discussion of access to knowledge to a discussion of its production, translation, use, protection and ownership.¹

Most Aboriginal scholars will agree that historical knowledge production is in all ways a project in which Native people are profoundly and politically invested but in these critiques, Indigenous scholars often use “history” and sometimes “History” as shorthand

¹ See, for example, Olive Dickason, *The Myth of the Savage and the Beginnings of French Colonialism in the Americas* (Edmonton: University of Alberta Press, 1984), Patricia Monture-Agnus, *Thunder In My Soul: A Mohawk Woman Speaks* (Halifax: Fernwood Press, 1995), Emma LaRocque, “The Colonization of a Native Woman Scholar,” in Christine Miller and Patricia Chuchryk with Marie Smallface Marule, Brenda Manyfingers and Cheryl Deering, eds., *Women of the First Nations: Power, Wisdom, and Strength* (Winnipeg: University of Manitoba Press, 1996), Devon A. Mihesuah, ed., *Natives and Academics: Researching and Writing about American Indians* (Lincoln: University of Nebraska Press, 1998), Linda Tuhiwai Smith, *Decolonizing Methodologies: Research and Indigenous Peoples* (London: Zed Books, 1999), David Long and Olive Dickason, *Visions of the Heart: An Introduction to Canadian Aboriginal Issues* 2nd Ed. (Toronto, Harcourt Brace, 2000), Beatrice Medicine, *Learning to Be an Anthropologist and Remaining “Native”* (Urbana: University of Illinois Press, 2001), Phillip Deloria, “Thinking About Self in a Family Way,” *The Journal of American History* 89:1 (June 2002), Devon A. Mihesuah and Angela C. Wilson, Eds., *Indigenizing the Academy: Transforming Scholarship and Empowering Communities* (Lincoln: University of Nebraska Press, 2004), Kathy Absolon and Cam Willett, “Putting Ourselves Forward: Location in Aboriginal Research,” in Leslie Brown and Susan Strega, eds., *Research As Resistance: Critical, Indigenous and Anti-oppressive Approaches* (Toronto: Canadian Scholars’ Press/Women’s Press, 2005): 97–126 and Dale Turner, *This is Not a Peace Pipe: Towards a Critical Indigenous Philosophy* (Toronto: University of Toronto Press, 2006).

for colonization, misrepresentation, dispossession, antiquated and racist approaches and as a powerful force of continuing oppression. However, rarely do these investigations inquire about how the professionalization of History as a discipline has served to reduce, exclude and invisibilize Native scholars in this field. This is the irony of claims that you have to be Native to do accurate historical scholarship about Native people, as if the process by which professional history is made and recognized is not itself profoundly political. The claim also fails to explain how history is produced as something Aboriginal people can not do in the first place.

Allied scholars, as they are sometimes called in other disciplines (usually where there are more working Native professionals), are also engaged in this question of exclusion, often in the context of offering assistance to Aboriginal students.

Considerable intellectual, political and administrative support comes from other non-white scholars who have cultivated important connections in their work and their professionalism to Aboriginal people. Several Canadian women's and gender historians have raised the question of diversity in their history departments in the context of discussions of the status of women in the history profession. Some historians of Aboriginal history have also offered constructive criticism about institutions of higher learning.² Thus far in the last two examples however, the focus has been on the Aboriginal undergraduate student, his or her problems within the education system, her family and community priorities, their financial means, their issues with the conditions of

² An example of this kind of critique was a discussion on aspects of race and history at the 2004 Fort Garry Lectures at the University of Manitoba. Robin Jarvis Brownlie, Adele Perry, Franca Iacovetta and Kathryn McPherson, "Roundtable Discussion," Panel at the Fort Garry Lectures in History, University of Manitoba, Winnipeg, Manitoba, May 2004.

work and study at the post-secondary level and their failure to see how “Canadian history can train them for their current struggles over politics and land-claim issues.”³ A lack of interest or investment in the historical profession is thus popularly explained as something related intrinsically to Nativeness, an awfully silly oversight, or the unfortunate result of economic hardship and social inequality. Rarely do these investigations of absence and exclusion inquire about how professional history itself works as an agent that discourages and marginalizes Native historical labour.

The discussion should also include Aboriginal professionals in other fields. It is significant that in Aboriginal nursing, professional identity developed in ways that insisted upon presence and representation, while in Aboriginal history, this has not happened. While in many ways, nursing as a profession is far more accessible than history, when considering its history of professionalization – gate-keeping to the extreme among white Euro-American women⁴ – this is still pretty significant. It is important to note that in the medical field, Native doctors too have made a place for themselves. Recently the Indigenous Physicians Association of Canada (IPAC) has insisted upon working with the Association of Faculties of Medicine of Canada (AFMC) to restructure

³ Franca Iacovetta summarizes many of these positions in her response to Linda K. Kerber’s essay on women historians and historical practice, “Towards a More Human Academy? Some Observations from a Canadian Feminist Historian,” *Journal of Women’s History* 18:1 (2006): 141-146.

⁴ See for example, Kathryn McPherson, *Bedside Matters: The Transformation of Canadian Nursing 1900–1990* (Don Mills, ON: Oxford University Press, 1996), Shula Marks, *Divided Sisterhood: Race, Class and Gender in the South African Nursing Profession* (London: Macmillan Press Ltd., 1994) and Darlene Clarke Hine, *Black Women in White: Racial Conflict and Co-operation in the Nursing Profession, 1890-1950* (Bloomington & Indianapolis: Indiana University Press, 1989).

curriculum for *all* medical students in Canada.⁵ Inattention to class privilege is a noticeable problem in current projects in the Aboriginal health careers field, however there is much to learn from it about ways to create a profession which is not inevitably non-Indian.

One assumption underlying recent professional conversations about Aboriginal history seems to be that Aboriginal people are not only absent from professional dialogue about Aboriginal history but also oblivious to History's professional culture altogether (perhaps operating in anachronistic time and panoptical space?⁶). The practice in history of referring to the professional (and presumed white) "we" as distinct and separate from the Aboriginal (and presumed non-academic) "them" is but one manifestation of this trend. Take for example Ken Coates' "'traditional' historians and First Nations"⁷ or Keith Carlson, Melinda Marie Jette and Kenichi Matsui's "academics and indigenous readers."⁸ By envisioning an "us" utterly devoid of "them" and a "them" which is not in the audience, historians leave the impression that Aboriginal people are not supposed to be here – reading, listening, taking notes, thinking historically. The result is the sense

⁵ Marcia Anderson and Barrie Lavalee, "The development of the First Nations, Inuit and Métis medical workforce," *Medical Journal of Australia* 186:10 (2007): 539-540.

⁶ Anne McClintock, *Imperial Leather: Race, Gender and Sexuality in the Colonial Context* (New York: Routledge, 1995).

⁷ Coates also demonstrates how Indigenous people are imagined by historians as having no engagement with planet earth whatsoever: "... historical writing on indigenous peoples has faced some important new challenges, from theorists who advocate new approaches to intergroup relations, from the insights provided by scholars working in other countries, from other academic disciplines, from new methodologies, and from First Nations people themselves." Ken Coates, "Writing First Nations into Canadian History: A Review of Recent Scholarly Works," *Canadian Historical Review* 18:1 (March 2000): 109 and 100.

⁸ Keith Thor Carlson, Melinda Marie Jette and Kenichi Matsui, "An Annotated Bibliography of Major Writings in Aboriginal History, 1990-99," *Canadian Historical Review* 82:1 (2001): 123.

that, as colleague Dr. Susan Hill has articulated, we are “playing historian.”⁹

In history, like other forms of work, there is a significant and seemingly irreconcilable dualism which divides Native people as the target or object of labour and Native people as workers. In nursing, for example, this split creates a single category of ‘patients’ of Native people, negating the possibility that they were and are providers of health care. In History, this split divides Native people as history and Native people as historians. We are reminded here of Philip Deloria’s arguments about expectation and expectedness. He argues that part of a project of understanding Indian modernity is to take as a subject of investigation the ideological and discursive frames non-Indians used to explain and contain Indian people. One of these frames is professional history. We cannot take the presumption of absence in the profession to be meaningless and incidental, but it is the result of the ways in which familiar categories like Indian and White, traditional and assimilated, savage and civilized, authentic and ‘tainted,’ advocacy and objectivity are made by and in turn create and materially enforce certain expectations.¹⁰ When many of us consider ourselves to be Aboriginal historians, or those who look at history from an Aboriginal perspective, how does “history” become something that is self-consciously non-Native, “outside” or apart from us? How did the discipline and the profession develop in ways that exclude the presence and the possibility of the presence of Aboriginal historians? Moreover, how and why does it continue to do so?

⁹ Susan M. Hill (assistant professor in the Indigenous and Contemporary Studies department at Laurier University, Brantford), personal communication, September 2007.

¹⁰ Philip Deloria, *Indians in Unexpected Places* (Lawrence: University of Kansas Press, 2004).

The assumption of cultural homogeneity among historians is a recent development. One hundred and fifty years ago, the idea that, as is suggested by the language used by historians, there are no Aboriginal historians in Canada, would not have made any sense. Two fine contributions by Maureen Konkle and Robin Jarvis Brownlie locate the mid-nineteenth century as a significant period of Aboriginal history writing in the works of, for example, George Copway, Peter Jones and others.¹¹ While we might think of these individuals as “Indians in Unexpected Places,” they were not particularly viewed that way by their contemporaries and they joined a cadre of Indian intellectuals, political organizers, poets and philosophers in the nineteenth century who, in their lectures and books, used history to counter misrepresentations of Native people, and to affirm, among other things, Native people’s political autonomy and human equality.

However history by Aboriginal people is distinctly silenced in the twentieth century (Brownlie argues until 1969 but I would argue, with a few exceptions, for the entire century). While Konkle does not address this silencing in her account, Brownlie argues that it was “due, no doubt, to a relative lack of public interest in the reading public and, in Canada, a general shortage of publishing opportunities.”¹² The second factor is not simply a result of the first however, as so many scholars have shown, there has never

¹¹ Maureen Konkle, *Writing Indian Nations: Native Intellectuals and the Politics of Historiography, 1827-1863* (Chapel Hill: University of North Carolina Press, 2004) and Robin Jarvis Brownlie, “First Nations Perspectives and historical Thinking in Canada,” paper presented at the annual meeting of the Canadian Historical Association, Saskatoon, Saskatchewan, May 2007. See also Bernd C. Peyer, Ed., *American Indian Nonfiction: An Anthology of Writings, 1760s-1930s* (Norman: University of Oklahoma Press, 2007) and Gretchen M. Bataille and Kathleen Mullen Sands, *American Indian Women Telling Their Lives* (Lincoln: University of Nebraska Press, 1987).

¹² Brownlie, “First Nations Perspectives and historical Thinking in Canada,” 12.

been a scarcity of interest in Indians.¹³ Importantly, neither author subscribes to a model of Aboriginal decline, so popular in history, to locate and then explain the silencing of Aboriginal histories. Neither author either, however, addresses professional history's role in this process. Around the turn of the century, history became a modern profession, and these two developments are not coincidental. As history moved towards "a career for university-trained, university-based professionals," it engaged in a process of erecting and policing the boundaries that determined who and who could not know, teach and practice history.¹⁴ It developed, as Donald Wright argues, "a set of common assumptions, questions, methods, and values," an "association to articulate and defend its interests" and "prolonged training in a definable body of knowledge, a credential system, a code of ethics, self-government and legislated access to a particular labour market," as well as a privileged access to financial and social reward for services.¹⁵ That shift made professional history writing indelibly entwined with issues of access to education and thus circumscribed not only white women's participation, as Wright and others argue,¹⁶ but also that of Aboriginal women and men. Whereas Native people could be and were

¹³ See for example Bernd C. Peyer, ed., *American Indian Nonfiction*, Philip Deloria, *Indians in Unexpected Places* and *Playing Indian* (New Haven, CT: Yale University Press, 1998), Daniel Francis, *The Imaginary Indian: The Image of the Indian in Canadian Culture* (Vancouver: Arsenal Pulp Press, 1997) or Hugh Shewell, "Enough to Keep Them Alive": *Indian Social Welfare in Canada 1873–1965* (Toronto: University of Toronto Press, 2004).

¹⁴ Donald Wright, "Gender and the Professionalization of History in English Canada before 1960," *Canadian Historical Review* 81, 1 (March 2000), 29, 35.

¹⁵ Donald Wright, *The Professionalization of History in English Canada* (Toronto: University of Toronto Press, 2005), 3–6.

¹⁶ Wright, "Gender and the Professionalization of History in English Canada before 1960," Bonnie Smith, *The Gender of History: Men, Women, and the Historical Practice* (Cambridge and London: Harvard University Press, 1998) and Beverly Boutilier and Alison Prentice *Creating Historical Memory: English-Canadian Women and the Work of History* (Vancouver: UBC Press, 1997).

historians before history professionalized, currently in 2008, there are no tenured Aboriginal professors working in history departments in Canada.¹⁷

That the modernization of the historical profession was precluded and strong-armed by Indian policy is obvious. By section 86(1) of the 1876 *Indian Act*, a university-educated Indian could be automatically stripped of Indian Status. Blair Stonechild shows that the policy was in fact broadened in scope in 1927 to coerce the enfranchisement of any Indian or Indians seen fit for Canadian citizenship, but finds that the law was never successfully imposed.¹⁸ However, it no less serves as an important narrative about how higher education was indelibly associated with civilization, later integration and how, in Devon Mihesuah's phrase, "Natives and Academics" get made to be opposing categories of inquiry and identity.¹⁹ As discussed in Chapter Two, for half of the twentieth century, official Indian school curricula maintained a nineteenth-century focus on manual as opposed to academic training. This had the effect of limiting Native people's ability to pursue post-secondary education and students were often hastily shuttled directly into workforce in "suitable" vocations like domestic service. The Department did have a measured and case-by-case system of discretionarily spending discretionary funds²⁰ on post-secondary education, however by the 1950s, as shown in Chapter Three, that system advocated cheaper, shorter adult education or vocational training programs like the

¹⁷ This statistic is the result of an informal survey of Indigenous and other scholars in various departments at Canadian universities as well as a database of Aboriginal Ph Ds and Faculty at Canadian Universities and Colleges collected by Marie Battiste, Aboriginal Learning Knowledge Centre, Aboriginal Education Research Centre, University of Saskatchewan.

¹⁸ Blair Stonechild, *The New Buffalo: The Struggle for Aboriginal Post-Secondary Education in Canada* (Winnipeg: University of Manitoba Press, 2007), 21–23.

¹⁹ Devon Mihesuah, *Natives and Academics*.

²⁰ Funds amounted to what annual Parliamentary Appropriations would allow.

Placement and Relocation Program and ultimately envisioned training and education as a step signaling a longer voyage towards equality by way of disintegrating Indian legal status. Even into the 1960s, higher education for Aboriginal people was often spoken about in terms of a 'transition' to modernity: wildlife was often mentioned, as was a vanishing way of life of the hunter and trapper, white settlement and industrial progress.²¹ In this case, it sounds as if Indian policy had actually taken a lesson from Indian history, as it has been professionally written and taught in Canada.

Historiography is a way of understanding the accumulation of theories, sources methods and principles of professional history and its purpose is to organize and explain how a certain body of knowledge developed over time. It is significant that historiographies of Aboriginal history by Canadian historians do not begin, for example by examining the works of people like Copway and Jones, and their discussions of the customs, characteristics, and traditions of Native nations, their documentation of colonization and settlement, and their political struggles for sovereignty. Rather, the history of 'our' history begins in one of two ways. The first is by way of early to mid-twentieth-century economic histories of Canadian national development. Here, Native people are depicted as the preludes to a national story and as backward or clever customers of a fur trade who quickly or slowly fall prey to superior technology, railroads and reserves. Second, our history begins as the late 1960s "newcomer" to history having arisen out of "relative obscurity"²² sometime after Canadian national, political, economic, military, intellectual, regional, business, labour, social, women's and ethnic history, and

²¹ For an example of 1960s Indian education philosophy, see Indian Affairs Branch, *The Indian In Transition: Indian Education* (Ottawa, Queen's Printer and Controller of Stationery, 1964).

²² Carlson, Jette and Matsui, "An Annotated Bibliography," 123.

also as a result of the civil rights movement, second-wave feminism, the Second World War and the 1969 White Paper. Here, we are introduced to intrepid historians in bulging history departments²³ who challenged evolutionary linear progressive history, questioned the truths about the moral, intellectual, technical and spiritual supremacy of the newcomers and sought to “interpret” the “perspectives” of Native people, but only those who lived long, long ago and who have either ‘declined’ in the face of, or ‘persisted’ in spite of, change over Canadian time. These two cohorts of historians form the basis of our understanding of the origins of Aboriginal history in Canada.

Aboriginal historiography plays a significant role in the normalization of the exclusion of Aboriginal people from professional history. Because it is conceived of as a progression of remote/objective/non-Aboriginal historians through time, each of whom “pushed the boundaries” in the field of historical scholarship, we are obliged to revere historians in those two crucial cohorts for arguing (“in splendid obscurity”) that Native people mattered at all.²⁴ Aboriginal history students are told of the ‘first’ Aboriginal historians that they wrote at a time of determinism, a desire to develop grand theories to justify western global hegemony, a belief in cultural evolution, a period of salvage ethnology, or in other words, “the way people did things back then.” This is a familiar

²³ There is a well-noted expansion of history departments across the country in the 1960s and '70s.

²⁴ Ken Coates, “Writing First Nations into Canadian History,” 99. See also example, James W. St. G. Walker, “The Indian In Canadian Historical Writing,” *Canadian Historical Association Historical Papers 1971* (1971): 21-51 and “The Indian in Canadian Historical Writing, 1972-1982” in Ian A.L. Getty and Antoine S. Lussier, eds., *As Long as the Sun Shines and Water Flows: A Reader in Canadian Native Studies* (Vancouver: University of British Columbia Press, 1983): 340-357” and Carlson, Jette and Matsui, “An Annotated Bibliography.” See also Arthur Ray’s introduction to Innis in Harold Innis, *The Fur Trade in Canada: An Introduction to Canadian Economic History*, with an introduction by Arthur J. Ray (Toronto: University of Toronto Press, 1999) and Binnema and Neylan, “Arthur J. Ray,” 1-17.

phrase to me because it was used with some frequency to excuse the vigorous racism of one of my relatives. Normalizing her racism in this way was supposed to encourage respect, but it never actually did. Among various things, she used to say was that my fairer, blue-eyed brother is the 'real McCallum.' While this was "the way" *some* people "did things," what they were doing merits some thought. She was creating and protecting boundaries of blood, name, heritage, status and history. Likewise, we cannot approach the history of the professionalization of Aboriginal history as an absent-minded "way of doing things." Historians actively produced histories which served to protect the boundaries of the historical profession in ways which eliminated not just the presence of Indian intellectuals but also even the possibility of that presence.

Aboriginal history was not just "relatively obscure" before the 1960s, it was *made* so. The 'original' or 'founding' historians of Aboriginal people wrote their fantasies of Native acquiescence to national development just after the tail end of the treaty and reserve period, during the Indian Residential School system and while an organizing Indian political movement struggled for treaty rights, religious freedoms, the halting of land surrenders and, of course, improved health and education. Harold Innis, for example, would have been aware of this, as he took part in an important University of Toronto-Yale University Conference in 1939 which brought together representatives of "the governments of Canada and the United States, as well as Indians, missionary societies, and scientists" to discuss such wide-ranging topics as Indian education, Indian policy, "land issues," health, arts and craft production and "racial tension" in Canadian society.²⁵ While some early anthropologists like James A. Teit became involved through

²⁵ C.T. Loram, and T.F. McIlwraith, *The North American Indian Today* (Toronto:

their work, however problematically, in Indian political struggle,²⁶ it is historiographical doctrine to point to the ‘sympathy’ of professional historians in the 1970s and the expert witness scene in the 1980s when discussing the origins of Aboriginal history.²⁷ We also need to investigate how professional historians engaged when Aboriginal students organized for greater access to education and when other disciplines like nursing worked to develop more culturally-sensitive programs in the 1970s and ’80s.

It is important to recognize the work and commitment of individual historians in these years, as well as the limits within which they toiled, such as the real scarcity of historical material they themselves could refer to and the myriad ways they too were marginalized in the profession. But there is a way in which this second cohort of historians is celebrated not simply because they made progressive contributions but also because they were white and made progressive contributions. The ethno-historians from the late 1960s and historians by the 1970s and ’80s onwards talked about ethnocentrism, cultural pluralism and culture clash *while* Indians continued to write about history in the context of contemporary struggle either outside of the academy as creative writers, journalists, Indian politicians and activists or in other fields like Anthropology, Sociology, English, Law, Education and Native Studies.²⁸ Aboriginal histories written

University of Toronto Press, 1943), x.

²⁶ Wendy Wickwire, “‘They Wanted ... Me to Help Them’: James A. Teit and the Challenge of Ethnography in the Boasian Era,” in Celia Haig-Brown and David A. Nock, eds., *With Good Intentions: Euro-Canadian and Aboriginal Relations in Colonial Canada* (Vancouver: University of British Columbia Press, 2006): 297–320.

²⁷ See for example, Binnema and Neylan, “Arthur J. Ray and the Writing of Aboriginal History,” in Ted Binnema and Susan Neylan, eds., *New Histories for Old: Changing Perspectives on Canada’s Native Pasts* (Vancouver: University of British Columbia Press, 2007): 8-9.

²⁸ An incomplete list of contributions in these years would include: Howard Adams, *Prison of Grass: Canada from a Native Point of View* (Toronto: New Press, 1975),

outside of the discipline were used in some history courses, but too often they were merely footnoted or worse, called polemic, which means unscholarly and unbalanced and un-history. Those who celebrate the contributions of this generation of historians tend to forget that, continuing into the 1980s, History as a professional discipline more often than not refused to accept the history of Indigenous people as a topic within its professional domain and pushed those interested in Aboriginal history out and to other departments like Anthropology.²⁹

Historians have recently been congratulating themselves on the significant shifts in professional Aboriginal history in the last twenty years, as they “found” Aboriginal women, stereotypes, the Indian Affairs Department, the processes of legal and social

Harold Cardinal, *The Unjust Society: The Tragedy of Canadian Indians* (Edmonton: M.G. Hurtig, 1969) and *The Rebirth of Canadian Indians* (Edmonton: M.G. Hurtig, 1977), Patricia Albers and Beatrice Medicine, *The Hidden Half: Studies of Plains Indian Women* (Lanham, MD: University Press of America, 1983), Verna J. Kirkness, *Evaluation Report: Education of Indians in Federal and Provincial Schools in Manitoba* (Ottawa: Department of Indian Affairs and Northern Development, 1978) and with D. Bruce Sealey, eds, *Indians without Tipis: A Resource book by Indians and Métis* (Winnipeg: William Clare, 1973), Emma LaRoque, *Defeathering the Indian* (Agencourt, AB: Book Society of Canada, 1975), Manitoba Indian Brotherhood, *The Shocking Truth about Indians in Textbooks: Textbook Evaluation* (Winnipeg: Manitoba Indian Cultural Education Centre, 1977). Journals such as the *Native Studies Review* (1984-), the *Canadian Journal of Native Education* (1980-), the *American Indian Quarterly* (1974-), *Wicazo Sa Review* (1985-) and the *Canadian Journal of Native Studies* (1981-) were committed to publishing Native scholars at this time.

²⁹ In his response to the panel “Power, Culture and Place: Aboriginal Historians in Aboriginal History,” at the 2008 Canadian Historical Association, Dr. John Milloy told a story about his own experiences studying the Aboriginal history of the fur trade at Oxford, where he was asked, “Indians, John? Should you not be over in the Anthropology department?” John Milloy, “Power, Culture and Place: Aboriginal Historians in Aboriginal History,” Facilitator/Respondent at the Annual Meeting of the Canadian Historical Association, University of British Columbia, Vancouver, British Columbia, 2-4 June, 2008. My mom, who also wanted to study Aboriginal history, had to reckon with the same closed-mindedness in History however she indeed had no choice in the matter. She earned a B.A. in Anthropology in the 1980s mostly by night and summer school at a local community college.

regulation, and culpable, capitalist settlers. Ted Binnema and Susan Neylan argue in a subtle yet important distinction of terms, that such “[a]cademics soon learned that doing Native history had real consequences for the lives of Aboriginal people.”³⁰ In spite of this marvelous accomplishment, they still could not ‘find’ Aboriginal historians. Within the discipline of history, scholarship by Native people is still largely considered primary source material. Olive Dickason’s meticulous histories of Indian image-making, colonial encounter both at the core and periphery of empire, French colonialism and Canadian First Nations, stand as an important exception and continue to be referred to by Aboriginal historians throughout the country.³¹ Having been forced to retire in 1996, however, Dickason was also the last tenured Aboriginal person to work in a history department in Canada, and while no less vitally important, her work is also emblematic of hard times for Native people in History.

In the Aboriginal history field alone, problematic hiring practices and limited training opportunities go some distance in explaining why few Aboriginal people commit to history at the graduate level and beyond. For the few positions in Aboriginal history, circular and self-referential credentials required by history departments exclude candidates with Ph Ds in Native Studies, a field where a lot of Native people who are interested in history and who want to work with Native faculty and alongside other Native students, are. More common than not, history departments simply omit

³⁰ Binnema and Neylan, “Arthur J. Ray,” 8.

³¹ Olive Patricia Dickason’s publications have been made into several editions, these are the first (and English language) editions of her most popular monographs: *The Myth of the Savage: And the Beginnings of French Colonialism in the Americas* (Edmonton: University of Alberta Press, 1984), *Canada’s First Nations: A History of Founding Peoples from Earliest Times* (Toronto: Oxford University Press, 1992), and *Visions of the Heart: Canadian Aboriginal Issues* (Toronto: Harcourt Brace, 1996).

(intentionally or absent-mindedly, both produce the same result and it is often difficult to tell) specialists in Aboriginal history and the field altogether. In terms of the current state of professional training, it is still rare that a history department in Canada offers graduate courses or comprehensive exams in the field of Aboriginal history.³² This suggests not so subtly that Aboriginal history is not professional history, in spite of the fact that it is recognized to be just that.³³

Aboriginal history remains a marginalized ‘field’ in part because history as it has professionalized in Canada is tied to a project of nation-state formation and it continues to be subsumed within national histories (Canadian, American) or imperial ones (British). In spite of the significant contributions of the fields and approaches of Indigenous Studies, anti- and post-colonial studies and critical race theory, in most undergraduate courses, Aboriginal people’s history is introduced in nervous, preliminary and usually prehistoric lectures only to be silenced for the rest of the school year in order to make way for the ‘real stuff.’ In ‘thematic’ history courses such as women’s history or education history (normally also oriented around the nation), Aboriginal people’s history is often confined to a single lecture, for example, “women in the fur trade” or “residential schools.” This leaves the unmistakable impression that there is no continuum of Aboriginal history, and, in these particular examples, after the fur trade, Aboriginal people became genderless and outside of residential schools, they had no engagement with education.

³² From my own experience, McMaster University stands out as having no undergraduate or graduate courses in Aboriginal history or professors who specialize in Aboriginal history. There needs to be a survey of history departments in Canada for more detailed information about their course offerings, fields of study, hiring practices and priorities.

³³ For example, the *Canadian Historical Review* has regularly listed works in Aboriginal history in its “Recent Publications relating to Canada” lists at least since 1990.

In the historical profession, the twin poles of the nation and modern professional practice remain unchallenged by Aboriginal history and history remains tied to the project of the nation in ways that subtly and unsubtly present history and more particularly Canadian history as not the project of Aboriginal people and non-white people more generally. Organized nationally, historians meet, practice and standardize the profession largely in the absence of other Native scholarship which is itself often unwilling to call itself history, much less 'Canadian' history. There is currently no widespread professional understanding in Canada that 'good' history must be also be good Aboriginal history, or that Aboriginal history changes the entire profession of history itself. Instead, Aboriginal history tends to be relegated to a small, segregated "field" or "subsection" of history. Here, it is taught for the ways it exemplifies, rather than challenges central debates in professional history including the nature of national narratives³⁴ and advocacy and objectivity.³⁵ To expand on just this last example, the debates over 'advocacy' and 'objectivity' in professional history tended to be in fact about an individual historian's position with regard to the state, and it was yet another way of engaging in a project of how to improve on a profession by building boundaries that exclude Native people.³⁶

³⁴ For a discussion of national narratives, see for example J.L. Granatstein, *Who Killed Canadian History?* (Toronto: Harper Collins 1998) and responses such as Franca Iacovetta, "Gendering Trans/National histories: Feminists Rewriting Canadian History," *Journal of Women's History* 19:1 (2007): 206-213.

³⁵ For a discussion of objectivity and advocacy in Aboriginal history, see Carlson, Jette and Matsui's "An Annotated Bibliography" and Kerry Abel, "Tangled, Lost and Bitter."

³⁶ Often 'advocacy' is used to subtly undermine an argument, for example, in this review of Shewell: "The advocacy that runs through the book adds to the intensity of the argument but raises concerns about its partisanship." Ken Coates, review of *Enough to Keep them Alive: Indian Welfare in Canada 1873-1965* by Hugh Shewell, *Journal of Interdisciplinary History* 37:4 (2007): 658. "Advocacy" is used here not to critique the

The development of useful and fair methodologies has been key to the professionalization of history and the focus of many recent professional Aboriginal histories has been on how to treat Aboriginal people and Aboriginal knowledge as subject.³⁷ The emphasis on methods stems in part from critiques of the erasure of Aboriginal people and epistemologies from history as historians are presently “doing” it.³⁸ But rather than inquiring about how professional historians came to know Aboriginal histories, Aboriginal people and their views of history are often essentialized in ways that ultimately secure the good old professional “we.” This focus on methodology often and perhaps inadvertently poses Aboriginal history as something “else,” not history, while building another boundary around those who can and cannot “do” it. Notably the dynamics in much of this research are similar to the 1960s Community Health Representatives program explored in Chapter Four, whereby Native people participate again as “informants” and “collaborators,” – both *extremely* loaded terms – paraprofessionals to career historians.

An emphasis in Aboriginal history on culture clash, rather than political implication, on image rather than engagement, on authenticity instead of content and on

argument, but the author’s position with regards to the imperial Canadian state. Consider Alvin Finkel’s review of the same work: “Shewell’s account is one that focuses heavily on original sin, in this case the government’s dispossession of Native people.” This critique was made in order to highlight an important alternative, “agency” and “Native voice,” however glibly calling Shewell’s arguments tantamount to a heavy focus on ‘original sin’ undermines, obscures and even makes light of the very real content of the book, which *is* a critique of the federal government. Alvin Finkel, review of ‘*Enough to Keep them Alive*’: *Indian Welfare in Canada 1873–1965* by Hugh Shewell, *Labour/Le Travail* 55 (Spring 2005): 325.

³⁷ See for example essays in John Sutton Lutz, ed., *Myth and Memory: Stories of Indigenous-European Contact* (Vancouver: University of British Columbia Press, 2007).

³⁸ “Doing Aboriginal History” Panel presented at the annual meeting of the Canadian Historical Association, Saskatoon, Saskatchewan, May 2007.

decline or on persistence as being the only expressions of Indigenous change over time, has also led to an emphasis on issues of identity for many Aboriginal academics. The authentic self, in academia and elsewhere, creates its opposite – those who are deemed to be in-the-closet, slippery, or even unindian. Identities real, imposed and imagined are sites of power and expectation within race scholarship and there is a simultaneous and qualified rejection of and desire for a racialized identity as an academic in this field. In addition to being hit by what one scholar calls the History Stick³⁹ (in our case that weapon that tells us what we do is not ‘real’ history), Aboriginal historians are also hit by the Identity Stick. Identity in many ways precedes what we write and reinforces a schism which makes invisible Aboriginal people as scholars and scholars invisible as Aboriginal people. The split makes Indigenous academic labour vulnerable in ways that non-Native labour is not. The two different careers of Ward Churchill⁴⁰ and Andrea Smith,⁴¹ each widely discussed at the time this dissertation was written, in some ways exemplify this process.

Instead of being part of a larger inquiry about human relations, for Aboriginal people, identity is a tool which disengages and detaches their labour into a singular, pre-determined, identifiable and much-coveted commodity. There is a prevailing notion that

³⁹ Antoinette Burton, “Who Needs the Nation? Interrogating ‘British History,’” *Journal of Historical Sociology* 10:3 (1997): 272–282.

⁴⁰ The movement to dismiss Ward Churchill as a scholar was in part the result of allegations that he is not ‘really’ Indian. For more on Churchill, see Scott Richard Lyons, “The Termination and Removal of Ward Churchill,” *The Indian Country Today*, February 23, 2005, printed also as “Why Indians Should Defend Churchill: Ward Churchill and the Identity Police,” *Counterpunch* February 19/20, 2005.

⁴¹ The process by which Andrea Smith’s tenure application was denied at the University of Michigan was in part related to a narrow institutional understanding of what counts as authentic scholarship. However there are always those who will make authentic Indianness the subject instead, see Steve Russell, “When Does Ethnic Fraud Matter?” *The Indian Country Today* April 4, 2008.

there is one kind of Indian scholar, and those who labour outside of this mold do so at their own peril. This singular kind of scholar makes our labour suitable for reserved positions, conversations, questions and discussions but not others. An awareness of identity on the part of non-Native scholars, on the other hand, serves to reinforce the boundaries of history as a place for them. For example, in conversation with non-Aboriginal history graduate student colleagues, more than once I have encountered the argument that non-Native historians should not compete for and “take away” jobs in Indigenous Studies and Native Studies. Why would they assume that Native academics would not want to work in a history department? What assumptions about the limits of representation of Aboriginal people in universities are evident here?

What is the price of exclusion and absence in history departments? What are, as labour historian David Roediger puts it, the “wages of whiteness”⁴² in this context? The effects of the ways in which Native women’s labour is understood as absent are evident not only in hair salons, hospitals and health care but also in classrooms where Aboriginal women also confront suspicion concerning their ability to work and their place in the workplace.⁴³ Also, a continuing expectation of absence leaves the university floor open to racism of the most overt nature. The professionalization of history also has wider implications beyond classrooms and universities in determining how our historical resources are preserved, protected, accessed and used in places like museums, archives,

⁴² David Roediger, *The Wages of Whiteness: Race and the Making of the American Working Class* (New York: Verso 1996).

⁴³ A brief survey of Indigenous university professors who teach history in other departments on RateMyProfessor.com revealed these expectations. While it is not reliable information about professors, the website is revealing of students’ expectations of them. In reviews of Indigenous professors, particularly women, there is a notable suspicion concerning their ability to know, evaluate and teach history and also their ability to be impartial.

parks, in publishing and in skilled historical rights and claims research. These are important domains of both popular and professional Aboriginal history in Canada, and they continue to be, with few exceptions, organized along the lines and objectives of professional historical models. While some have been variably 'receptive' to Indigenous knowledge, none have been seriously confronted by Indigenous professional historical labour.⁴⁴

While taking my undergraduate degree at McMaster, I recall conversations with my education counsellor about my fields of interest. "History? How is that going to help our people?" he asked. Another counsellor urged me strongly into the nursing field, where there was a 'real' employment need. Even while I surveyed other Aboriginal academics about the presence of Aboriginal scholars in history departments, I was asked, "Why does this matter?" When I approached one Aboriginal nurse for an interview about the history of Aboriginal nursing, she asked, "Why would we want a historian to do this?" The wages of whiteness that professional history pays is that while history has always been and continues to be one of the ways we document our lives, understand our past and protect our rights, it is a less and less relevant field to the project of mounting of a full challenge to colonialism, racism and oppression. In the various essays and papers on wage work that went into this thesis I have written the phrase, "this is part of a larger project" so many times that it is hard to conceive of this now actually being the "larger project" itself. In fact, it is not. The larger project is to be conscious of those who mount this challenge in all places, especially unexpected ones.

⁴⁴ Antoinette Burton, "Archive Stories: Gender in the Making of Imperial and Colonial Histories," in Phillipa Levine, ed., *Gender and Empire* (Oxford: Oxford University Press, 2004): 281–293.

Appendix One
Objectives of the Aboriginal Nurses Association of Canada
1975 and 1995

RNCIA Objectives, 1975:¹

1. To act as an agent in promoting and striving for better health for the Indian people, that is, a state of complete physical, mental, social and spiritual well-being
2. To conduct studies and maintain reporting, compiling information and publishing of material on Indian health, medicine and culture
3. To offer assistance to government and private agencies in developing programs designed to improve health in Indian communities.
4. To maintain a consultative mechanism whereby the association, bands, government, and other agencies concerned with Indian health may utilize
5. To develop and encourage courses in the educational system of nursing health professions on Indian health and cross-cultural nursing
6. To develop general awareness of Indian and non-Indian communities of the special health needs of Indian people
7. To generally encourage and facilitate Indian control of Indian health involvement and decision-making in Indian health care
8. To research cross-cultural nursing and cross-cultural medicine and develop and assemble material on Indian health
9. To actively develop a means of recruiting more people of Indian ancestry into the medical field and health professions
10. To generally develop and maintain on an on-going basis, a Registry of Registered Nurses of Canadian Indian Ancestry.

¹ Library and Archives Canada, Record Group R11504, Aboriginal Nurses Association of Canada, Volume 1 File 1-8, "History."

ANAC Objectives, 1995²

1. To act as an agent in promoting and striving for better health for the Indian and Inuit people; that is, a state of complete physical, mental, social and spiritual well-being.
2. To conduct studies and maintain reporting, compiling and publishing of material on Aboriginal health, medicine and culture.
3. To encourage and facilitate Aboriginal control of Aboriginal health, and involvement and decision-making on matters pertaining to health care services and delivery.
4. To offer assistance to government and private agencies in developing programs designed to improve health in Aboriginal communities.
5. To maintain a consultative mechanism within the association, with band governments and other agencies concerned with Aboriginal health issues
6. To develop and encourage courses in the education system on nursing, the health professions, Aboriginal health and cross-cultural nursing.
7. To develop general awareness in Aboriginal and non-Aboriginal communities of the special health needs of Aboriginal people.
8. To conduct research on cross-cultural medicine and develop and assemble material on Aboriginal health.
9. To actively develop a means of recruiting more people of Aboriginal ancestry into the medical field and the health professions.
10. To generally develop and maintain on an ongoing basis a registry of Aboriginal Registered Nurses.

² Mary-Ellen Kelm and Aboriginal Nurses Association of Canada, *30 Years of Community* (Ottawa: Aboriginal Nurses Association of Canada, 2005), 9-10.

Appendix Two Statement of Informed Consent

This consent form, a copy of which will be left with you for your records and reference, is only part of the process of informed consent. It should give you the basic idea of what the research is about and what your participation will involve. If you would like more detail about something mentioned here, or information not included here, you should feel free to ask. Please take the time to read this carefully and to understand any accompanying information.

Research Project Title: Aboriginal Women and Paid Labour in Post-War Manitoba

Researcher: Mary Jane McCallum, Ph D Candidate, Department of History, University of Manitoba

Description of the Project: The purpose of this research is to investigate the education, experiences and work of Aboriginal women in Manitoba in the post World War II period. The approach taken to the project is to combine archival research with interviews with Aboriginal women who engaged in paid labour between the years 1945 and 1979.

Procedures for Interviews: Prior to each interview, subjects will be given consent forms. There is no risk involved in this study. A tape recorder will be used to record the interviews for transcription. Follow-up phone interviews may be necessary for clarification of points made during the interview. Each participant has the right to decline to participate, to choose to remain anonymous, to read the final product of this Ph D dissertation, and will be asked to choose whether or not to include their interviews in a larger repository of archives. If requested, confidentiality will be protected by the use of pseudonyms and vagueness of circumstantial details which may lead to detection.

Researcher's obligations: Mary Jane McCallum will provide a copy of the research to each of the participants, to the ANAC and to any other interested organizations. Until this point, data will be stored in my home. Participants will be remunerated for their information at a rate acceptable to community standards (approximately \$40.00 per hour).

Statement of Informed Consent (cont.)

For the purposes of clarity, please circle 'Yes' or 'No' to the following questions:

- | | | |
|--|-----|----|
| 1) I agree to let the researcher use my name for the purposes of this study | Yes | No |
| 2) I would like to remain anonymous | Yes | No |
| 3) I agree to let this research be used in future studies | Yes | No |
| 4) I agree to let this interview be housed in the an archive for future use | Yes | No |
| 5) I agree to let the researcher transcribe and copy verbatim the text of this interview within the body of the thesis | Yes | No |
| 6) I have read and understood this consent form | Yes | No |

Your signature on this form indicates that you have understood the information regarding participation in the research project and agree to participate. In no way does this waive your legal rights nor release the researchers, sponsors, or involved institutions from their legal and professional responsibilities. You are free to withdraw from the study at any time, and/or refrain from answering any questions you prefer to omit, without prejudice or consequence. Your continued participation should be as informed as your initial consent, so you should feel free to ask for clarification or new information throughout your participation.

Researcher:
Mary Jane McCallum
Department of History
University of Manitoba
(204) 947-9285

Supervisor:
Adele Perry
Department of History
University of Manitoba
(204) 474-8107

This research has been approved by the University of Manitoba Joint Faculty Research Ethics Board. If you have any concerns or complaints about this project you may contact any of the above named persons or the Human Ethics Secretariat at (204) 474-7122. A copy of this consent form has been given to you to keep for future reference.

Participant's Signature

Date

Researcher's Signature

Date

Appendix Three

Sample Interview Questions

Yourself:

1. What is your name? Where did you grow up? Where did you attend school?
2. Describe your work history. How did you get into nursing?

Education:

1. Where did you get your nursing education? Why did you choose this program?
2. How did you go about applying for nursing school? Was it difficult to get in?
3. Describe your education experience.
4. Did you have to relocate for school and/or work? If so, what was your experience?
5. Did you receive financial support (loans, grants, scholarships) for your education?
6. Were there any other Native or Métis students in your program? Did you know any other Aboriginal nurses? If so, who?

Getting a job:

1. How did you go about getting a job once you were finished your nursing program?
2. Were you at any time contacted by Indian Affairs or Health?

Experience of Employment:

1. Where have you worked as a nurse? In what capacities?
2. Do/Did you enjoy your work?
3. What is your approach to healthcare delivery?
4. Do/Did you work with Aboriginal patients?
5. While working, did you meet other Aboriginal people working as well?
6. Do/Did you experience racism in your work?
7. Was there a hierarchy of workers at your workplace? Were Native and Métis people represented in all positions?
8. Did you at any point or points stop working? When? Why?
9. Were/Are you active in any nursing and/or political or social organizations?
10. What role does your work play in your life? In our history as Aboriginal people?
11. Describe any other projects, nursing or otherwise, that might be related to this topic.
12. What do you think are the major issues for Aboriginal nurses currently/ in the past?

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