# Giibinenimidizomin: Owning Ourselves—Critical Incidents in the Attainment of Aboriginal Identity Giibinenimidizomin: La possession de soi—Incidents critiques dans l'atteinte d'une identité autochtone

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#### ABSTRACT

This research explored the facilitation and hindrance of Aboriginal identity attainment and developed a scheme of categories to describe what facilitates and hinders cultural identity among Canadian Aboriginal adults living in British Columbia. Twelve individuals, interviewed using the critical incident technique, were asked to describe observable events that they thought had significantly helped or hindered their Aboriginal identity. In total, 114 helping incidents and 24 hindering incidents were identified. Helping incidents were placed into 12 categories (Participating in a Cultural Gathering, Participating in a Group of Aboriginal People, Connecting with Family, Changing Self-Perception, Helping Other Aboriginal People, Verbalizing Experiences as an Aboriginal Person, Spiritual Experience, Getting Support from Parents, Attending a Cultural Gathering, Being Influenced by a Grandparent, Personal Accomplishment, and Experiencing Positive Representations of Aboriginals). Hindering incidents were placed into 3 categories (Living with Separation from Aboriginal Peoples/Culture, Experiencing Racism and Prejudice, and Experiencing Negative Portrayals of Aboriginals). Ad hoc analyses supported the trustworthiness of the proposed categorical system. The results support the perspective of the dominant literature, while suggesting future directions for research and practice in multicultural counselling with respect to Aboriginal cultural identity.

# RÉSUMÉ

Cette recherche a exploré ce qui facilite et entrave la réalisation d'une identité autochtone et a développé un système de catégories décrivant ce qui facilite et entrave l'identité culturelle chez les Canadiens adultes autochtones vivant en Colombie-Britannique. Douze personnes ont été interviewées en utilisant la technique des incidents critiques et ont été invitées à décrire les événements observables qui, à leur avis, ont significativement facilité ou entravé la réalisation de leur identité autochtone. Au total, il y a eu 114 incidents facilitant et 24 incidents entravant. Les incidents facilitant ont été mis dans 12 catégories : participation à un rassemblement culturel, participation à un groupe d'Autochtones, liens avec la famille, changement d'auto-perception, aide aux autres personnes autochtones, verbalisation des expériences en tant que personne autochtone, expérience spirituelle, soutien des parents, assistance à une rencontre culturelle, influence d'un grand-parent, accomplissement personnel, et représentations positives d'Autochtones. Les incidents constituant des entraves ont été mis dans 3 catégories : vivre séparé des peuples et culture

autochtones, subir le racisme et les préjugés, et vivre les représentations négatives des Autochtones. Des analyses ponctuelles soutiennent la fiabilité du système de catégories proposé. Les résultats confirment la perspective de la littérature dominante, tout en suggérant des orientations futures pour la recherche et la pratique dans le counseling multiculturel à l'égard de l'identité culturelle des Autochtones.

The field of North American multicultural counselling informs current theories of counselling and psychotherapy as practiced with culturally diverse populations. However, counselling services in North America have been noted to be culturally biased or inappropriate for the diverse life experiences of ethnic clients (Sue, Ivey, & Pedersen, 1996; Sue & Sue, 1990). Culture-infused counselling models for Canadian ethnic groups are growing areas in the multicultural counselling literature (Collins & Arthur, 2010a, 2010b; Collins, Arthur, & Wong-Wylie, 2010). This research focused on Aboriginal people as a heterogeneous cultural group in Canada that have been poorly represented and disparaged in Canadian history (Anderson, 2000; Lawrence, 2004; Trimble, 1995).

The impact colonization has had on Aboriginal cultural identity should be understood within a historical perspective. The Indigenous populations of the Americas were decimated by infectious disease, warfare, and active suppression of culture and identity (Chrisjohn & Young, 1991; Chrisjohn, Young, & Maroun, 1997; Deloria & Lytle, 1983; Fast & Collin-Vézina, 2010; Kirmayer, Dandeneau, Marshall, Phillips, & Williamson, 2011; Trigger & Swagerty, 1996; Waldram, 1997; York, 1990). Canada contains spaces fraught with inequity, racism, dislocation, marginalization, and cultural and spiritual alienation (Razack, 2002). The social, economic, cultural, political, and health challenges faced by Aboriginal peoples have been extensively documented throughout the publications of the Royal Commission on Aboriginal Peoples (1995, 1996). The issue most critical to the examination of this research was the loss and gain of Aboriginal cultural identity. Research to promote health and healing and to inform professional health care practices with today's Aboriginal peoples is a growing area in the research literature.

The original inhabitants of Canada face several realities that impact cultural identity and stage of acculturation due to the continual economic dominance by settler societies, Indian status, residential school issues, level of education, and demographics (Anderson, 2000; Lawrence, 2004; Restoule, 1999, 2000; Stewart, 2009). There is evidence that those with strong ethnic and cultural identities are more likely to have and maintain mental wellness, high self-esteem, and resilience (Kiang, Yip, Gonzales-Backen, Witkow, & Fuligni, 2006; Martinez & Dukes, 1997; Umana-Taylor, 2004; Yip & Fuligni, 2002). There is literature on the relationship between ethnic/cultural identity and substance use (Whitbeck, Chen, Hoyt, & Adams, 2004; Yu & Stiffman, 2007). In research with Navajo adolescents, stronger cultural identity had an effect on reducing depression (Reichman, Wadsworth, & Deyhle, 2004) and improving psychosocial adjustment (Jones & Galliher, 2007). Empirically validated research to guide assessment and counselling with Canadian Aboriginal peoples for the important therapeutic task

of aiding clients in their acquisition and maintenance of a healthy cultural identity is discussed next.

Social identity theory (Lewin, 1948; Tajifel & Turner, 1979) stipulates that being a member of a group provides individuals with a sense of belonging, contributing to a positive self-concept. Aboriginal scholars report that obtaining support from others, anchoring self in cultural tradition, expressing oneself (McCormick, 1996, 1997a), and circle work based on Indigenous values and medicine wheel teachings (Brendtro, Brokenleg, & Van Bockern, 1990; Hart, 2002) are some ways that Aboriginal peoples heal. Connecting with nature and culture is an Aboriginal means of healing, and it is a way of meeting attachment needs within an Indigenous understanding of healing relationships (McCormick & Gerlitz, 2008). Interconnectedness is essential to an Aboriginal worldview (Berry, Trimble, & Olmedo, 1986; McCormick & France, 1995), yet there are potential identity problems for Aboriginal peoples resulting from imposed language and culture dominance and the denigration of Aboriginal cultures (Anderson, 2000; Berry, 1990, 1999).

Social identity theory (Lewin, 1948; Tajifel & Turner, 1979) predicts the likelihood that identification with two distinct cultures is problematic for identity formation because of conflicts in attitudes, values, and behaviours. Systemic and familial pressures factor into decision making between multiple identities, and bicultural integration was reported to be an ongoing effort for Aboriginal people who identify with multiple races (Lawrence, 2004). Social identity theory (Tajifel & Turner, 1979) supports the finding that socially subordinated peoples with stolen and suppressed histories struggle to find new ways of self-identifying (Anderson, 2000; Berry, 1999; Lawrence, 2004).

The Minority Identity Development model (Atkinson, Morten, & Sue, 1998) describes stages of preference for and against one's own culture and the dominant culture. A later stage of minority cultural identity attainment occurs when a person develops a cultural identity premised upon both the dominant and minority cultural group views (Atkinson et al., 1998). In the current study, the descriptive categories of how Aboriginal identity is attained challenges the view that Aboriginal cultural identity, as a minority identity, must be premised upon both Euro-Canadian and Aboriginal cultural group views. A Euro-Canadian/Aboriginal integrated identity is purported to promote greater psychological health than a unicultural ethnic identity, according to Atkinson et al.'s Minority Identity Development model. This opinion speaks to the ethnocentric discourse within psychology that arguably has shaped minority cultural identity models (Duran & Duran, 1995). This research proposed to address this disagreement in the literature.

Ethnic identity formation has been compared to the process of ego identity formation that takes place over time (Atkinson et al., 1998; Cross, 1978; Kim, 1981). Mohawk scholar Sylvia Maracle documents the Aboriginal identity formation process as having four interrelated components: (a) resisting negative definitions of being, (b) reclaiming Aboriginal tradition, (c) constructing a positive identity

by translating tradition into the contemporary context, and (d) acting on that identity in a way that nourishes the overall well-being of our communities (as cited in Anderson, 2000). This model speaks to the reality of the historical and social forces that portray deprecatory and incorrect representations of Aboriginal people across time.

Attention to Aboriginal identity has largely been from the legal system (Anderson, 2000; Lawrence, 2004; Restoule, 2000), where the Indian Act governs who is Indian and who is not. Shifting this power away from the Indian Act and toward Aboriginal people requires individual self-identification as the process of being and becoming what one is within a socio-political and cultural context (Restoule, 1999). This individual self-identification is the operational meaning of "Aboriginal Identity" in this research and is the closest English translation of *Giibinenimidizomen*, the Anishinaabe (i.e., Ojibway language) word that describes personal sovereignty, or "owning ourselves."

The Critical Incident Technique (CIT) was selected for this study because it was designed to explore and identify directly observable behaviours deemed helpful or hindering to a specific outcome (Flanagan, 1954; Woolsey, 1986). There is empirical support for the use of CIT to generate comprehensive and detailed descriptions, making it a favourable performance choice over competing research methods (Levine, Ash, & Bennett, 1980). The purpose of the study was to examine the experiences and meaning of what events help or hinder the attainment of cultural identity for Aboriginal people living in British Columbia, Canada. Categories of events obtained from this research inform multicultural counselling literature about some culturally and socially defined concepts of Aboriginal cultural identity attainment from 12 self-identified Aboriginal adults.

## **METHOD**

CIT focuses on concrete, observable incidents, describing events leading up to a specific outcome (Flanagan, 1954; Woolsey, 1986). CIT reflects participants' voices with personal descriptions of identity attainment experiences, the events leading up to the reported outcome, and what happened as a result. The interview questions allowed the researchers to discern categories of events helpful and hindering in the attainment of an Aboriginal identity. The basic principles of CIT that will be presented are sampling procedures, participant composition, interview format, data analysis procedures, and validation procedures. Thinking retrospectively, participants directly observed and shared their own lived experiences of critical events that helped or hindered their cultural identity attainment.

# **Participants**

All participants were informed verbally and in writing about this study by the lead author. Recruited participants emerged through professional network contacts within Vancouver, British Columbia. They were made aware that both researchers are First Nations (Ojibway and Mohawk, respectively) with extensive experience working as counsellors in Aboriginal communities. Participants are all permanent residents of British Columbia, and they reflect the cultural diaspora of Aboriginal peoples living in urban settings within and outside of their traditional territories. At the time of data collection, participants ranged in age from 25 to 67, with a median and mean age of 46. All 12 participants (6 male, 6 female) were Indigenous peoples living with multiple levels of separation from their traditional territories. Critical incidents (CIs) totalled 137. CIs were provided by the participants representing the Coastal Salish, Cree, Dakota, Navajo, Nisga'a, Ojibway, Shuswap, and Sto:lo First Nations, living in Coastal Salish territory. Participants were compensated with a meal preceding the interview and/or a gift of a metre of fabric and a pouch of tobacco, depending on their personal and cultural preferences. The passing of tobacco is appropriate for Ojibway, Cree, and Dakota participants, and for those participants who have adopted this practice. The provision of food and gifts preceding any activity when people are expected to offer personal stories is a necessary show of respect.

# Procedures

#### INTERVIEW

The interview for elicitation of events was preceded by an unrecorded rapport-building pre-interview conducted by the researcher. The purpose of a pre-interview is to clarify the objective of the study and describe the criteria of a critical incident in addition to addressing participant concerns. Participants were presented with a consent form explaining the study purpose, the interview questions, data/interview confidentiality, and study withdrawal rights. All concerns were addressed, consent was provided by each of the 12 participants, and no participants withdrew from the study. The interview question used for the study was

Think back to a time when you felt a sense of appreciation for your culture, and meaning in your identity as an Aboriginal person. At the time you may have felt good about being a member of your nation, or proud of your culture. What was happening for you at this time?

To facilitate the identification and exploration of CIs, the researcher used active listening, paraphrasing, clarification questions, and probing to determine whether incidents met inclusion criteria (Flanagan, 1954; Woolsey, 1986). When the participant was finished recounting an event, the process was repeated until the participant could not verbalize any more CIs. Participants were asked to share events that were both helping and hindering to their Aboriginal identity attainment, offering events determined in their own particular order of understanding.

The interviews were conducted between February and May, 2003. Three pilot interviews were conducted to determine the effectiveness of the wording of the question. The outcome of these pilot interviews was that the statement "feeling proud to be Aboriginal" evoked powerful memories and was meaningful to participants' understanding of their Aboriginal identity attainment. All interviews

were audiotaped and conducted by the lead author in the research office or in the home of the participant.

# TRANSCRIPTION AND EXTRACTION

These interviews were transcribed verbatim and subjected to thematic analysis in order to extract the helping or hindering actions that fit the criteria necessary to make it critical. Events were extracted and sorted according to the specified criteria, and analyzed in three stages.

The 12 transcribed interviews were assigned a code number to ensure confidentiality. Single incidents were typed onto cards based on the spoken words of only the participant. The transcript analysis process was co-examined by both researchers. The interviewing researcher highlighted within the transcribed text of each interview (a) the source of each event, (b) the story stated with reasonable completeness relevant to the helping/hindering action, and (c) the outcomes bearing on the aim of each extracted event. This process ensured that all incidents used followed Flanagan's (1954) criteria for a CI. Those that did not follow Flanagan's criteria were either deleted or scrutinized for which aspects were missing. After analysis was complete, participants were invited to see the verbatim interview transcript and to clarify the information they provided. Incomplete CIs were addressed at this stage, and those that were completed by the participants were included in the overall sample of CIs.

The sample size in CIT refers to the number of incidents collected (Woolsey, 1986). CIs are collected until redundancy appears in the data (Flanagan, 1954; Woolsey, 1986) and are checked via consensual agreement among researchers. The emergent and stable scheme of categories reported in the results was required to determine redundancy.

#### SORTING OF CRITICAL INCIDENTS

The CIs were sorted according to an open-ended, inductive process of categorization (Woolsey, 1986) to determine categories that were meaningfully distinct. An appropriate and useful time frame of reference was selected, and then the authors sorted through a small sample of CIs and defined tentative categories. CIs were classified into tentative categories to be refined, and new categories were created for incidents that could not fit until all incidents were classified. Lastly, the authors selected how specific the classification of incidents should be, based on the knowledge that greater specificity renders more information, whereas more general classification results in greater reliability. The second author refined the category scheme specificity and name phrasing.

# VALIDATION PROCEDURES AND RIGOUR ANALYSIS

Objectivity, factualness, and accuracy were three criteria used to evaluate the worth of this study. The researcher and participants established objectivity by mutually agreeing that a certain behaviour was helping. Factualness was established by the first-hand direct observation made by the participant of a specific

behaviour within a context. Accuracy of the observation was ensured from the knowledge that the observer was qualified and gave descriptions that other observers can corroborate.

CIT uses a specific format in addressing the trustworthiness, usefulness, soundness, and theoretical validity of the emergent category scheme (CS) (Butterfield, Borgen, Amundson, & Maglio, 2005; Woolsey, 1986). The CS was subjected to two independent coder assessments and yielded an average concordance rate of 93%, exceeding the minimum credibility rate of 85%. The high concordance rate provided evidence that the CS was sound (Butterfield et al., 2005; Woolsey, 1986). Participant cross-checking of transcribed interviews, their extracted CIs, and the emergent CS enhanced interpretive validity of the categories as participants were treated as experts of their own experience (Fontana & Frey, 2000). Ten percent of the total CIs were withheld from categorization until the end of the study, and easy categorization of these withheld CIs indicated redundancy of the CIs. Participation rates for each category were calculated, and ranged from 25% to 83%, meeting and exceeding the minimum requirements of 25% for categories to be considered important to the aim of the study (Butterfield et al., 2005).

Construct validity was demonstrated by the qualified observations of the participants who reported CIs relevant to the study's purpose. In addition to the 12 in-person audiotaped and transcribed interviews, 3 of the participants responded to clarifying questions through written e-mails. Both forms of interviewing are research practices intended to ensure descriptive validity (Alfonso, 1997). Participants' own words were maintained as much as possible. Clarifying questions ensured interpretive validity (Alfonso, 1997). Finally, theoretical validity was assessed by checking with the previous research in the area of Aboriginal identity, and with informed opinion. The results of this process are discussed in the final section of the article.

# ETHICS

While the researchers and participants were all Aboriginal peoples, there was a range of cultures within this project that went beyond ethnicity. Cross-cultural research with Aboriginal Canadians requires attention to the role of power, control, research design, and data ownership (Marshall & Batten, 2004). Process consent was introduced simultaneously with informed consent. There were multiple collaborative interactions when participants could review, revise, or withdraw data, or terminate research participation without prejudice. Participants were given copies of their interview transcripts to keep, and the extracted incidents and category scheme were in some cases collaboratively produced. The three pilot interviews served to assist in the construction of the interview questions, and the final emergent categorical scheme was made available to participants. Some participants requested copies of the thesis, which were provided electronically. This research was conducted with both an insider and outsider perspective as one third of the participants, as well as the interviewing researcher, were Ojibway persons living in similar regions within Coastal Salish traditional territory.

#### RESULTS

The 15 categories will be presented in order of decreasing participation rate. The 12 helping categories will be discussed first, and the 3 hindering categories will be discussed last. The tables include both the frequency and participation rates (number of participants reporting an incident(s) within a particular category divided by total number of participants × 100) of the 12 helping categories (in Table 1) followed by the 3 hindering categories (in Table 2).

Table 1.
Facilitation of Aboriginal Identity

Category title	n (Incidents N = 114)	Participation rate (%)
1. Participating in a cultural gathering	20	83
2. Participating in a group of Aboriginal people	15	58
3. Connecting with family	11	58
4. Changing self perception	14	50
5. Helping other Aboriginal people	8	50
6. Verbalizing your experiences as an Aboriginal person	7	50
7. Spiritual experience	7	42
8. Getting support from parents	6	42
9. Attending a cultural gathering	9	33
10. Being influenced by a grandparent	7	33
11. Personal accomplishment	5	33
12. Experiencing positive representations of Aboriginals	5	25

Table 2. Hindrances to Aboriginal Identity

Category title	n (Incidents N = 24)	Participation rate (%)
13. Living with separation from Aboriginal people/culture	e 12	50
14. Experiencing racism and prejudice	8	42
15. Experiencing negative portrayals of Aboriginals	4	33

# Summary of Results

Twelve categories of CIs were found to be reasonably reliable for helping Aboriginal identity attainment and three were found to hinder it. The combination of these results support and agree with previous findings of the significance of culture, family, and community on the shaping of Aboriginal identity (Anderson, 2000; Berry, 1999; Lawrence, 2004). Each helping category (1 through 12) emphasizes the influences of self (categories 4, 6, 7, 11), family (categories 3, 8, 10), culture (categories 1, 7, 9, 12), and community (categories 2, 5, 12) on Aboriginal identity.

The hindering categories (13 through 15) all have aspects of disconnection from culture and community and speak to damage caused to Aboriginal identity by collective misinformation/misrepresentations about Aboriginal peoples and culture. *Experiencing racism* and *Negative representations of Aboriginal people* (14, 15) are the results of misinformation directed towards the self and towards one's people/community.

Perceived discrimination is also found to be a primary risk to resilience in American Indian youths (LaFromboise, Hoyt, Oliver, & Whitbeck, 2006). The first stage of Aboriginal identity development (Anderson, 2000) involves deconstructing the messages of *what I am not* and resisting the negative definitions of being. This is a legitimate process of resisting colonial definitions of being and is an integral part of counselling as decolonization (Stewart, 2009). It is the act of regaining personal sovereignty, or *Gibinenimidizomin*.

Maracle's model (as cited in Anderson, 2000) fits the results of this research more than other minority identity development models because it describes a process of overcoming a loss of culture and tradition unique to Aboriginal cultures in North America. The working alliance is the conceptual foundation for multicultural counselling competence (Collins & Arthur, 2010a, 2010b) and interventions that support an understanding that where the client is and where they want to be rests on cultural awareness of the other and the self. The attitudes and beliefs, knowledge, and skills of the counsellor requires research-supported cultural identity models and trustworthy frameworks to facilitate cultural identity expression and exploration. The results of this study are intended to assist in the construction of such a framework. Counsellors working with Aboriginal clients should view the relationship as co-constructed (Stewart, 2009) and the individual should be considered within the context of their family and community (Stewart, 2009).

# DISCUSSION

The results suggest that personal identity is a vital part of Aboriginal identity attainment. Restoule (2000) has argued that personal and cultural domains of identity are inextricably linked. Restoule also makes the argument for including a historical and contextual perspective in Aboriginal identity research. This research also found that the individual, family, cultural, and community context of the participants were integral to their personal and cultural identities. Developing deep understandings about these contexts (personal, family, culture, history, and community) is necessary for both researchers and counsellors interested in identifying factors that contribute to and detract from Aboriginal peoples' cultural identity. Some of the historical contexts that emerged in this research were Indian residential schools, the Canadian public school and transportation systems on- and offreserve, the Korean War, the Indian Control of Indian Education movement, the battle in the pines at Kanesatake, Quebec, and the Aboriginal healing movement.

Participant selection processes largely shape the results of research with Aboriginal peoples. This research involved permanent residents of British Columbia who

were living with varying degrees of separation from their land and culture. Some demographic variables for consideration in future research and applied practice should address participant geography, education levels, residential school and military history, institutional involvement (e.g., child welfare, prison), age, and gender.

Method selection affects the depth and breadth to which findings can be extended. For instance, in this project, participants reported only segments of information that they could recall within a 60-minute interview. Methods that incorporate longitudinal data collection are recommended for further inquiry. Construct specificity with respect to Aboriginal identity is another area that requires further attention by researchers. For example, participants in this project could only render information they could express verbally or that is culturally sanctioned to be spoken verbally. Participants expressed feelings of protection toward incidents deemed culturally sacred. The researcher respected the wishes of participants who chose to talk about sacred and solemn events outside of the critical incident interview. Sacred sanctions placed on one's experiences is one example of participants' differential expressions of Aboriginal identity, personal identity, and the interrelationships between personal and cultural identity.

Although it is necessary to challenge the legal definition of Aboriginal identity, it is also important to contain and describe the complexities of Aboriginal identity while exploring it with both research participants and clients. Identity work with Aboriginal clients and research participants requires an exploratory posture and attention to the interdependency of personal and cultural identity.

The implications of the emergent category scheme extend the previous research (Anderson, 2000; Berry, 1999; Lawrence, 2004; Restoule, 2000) on Aboriginal cultural identity by providing empirically validated research that is formatted for counselling settings. Identity work with Aboriginal clients must attend to the interconnections and relationships among individuals' nested identities within self, family, culture, history, and community. Current ethnic minority identity models (Atkinson et al., 1998; Cross, 1995; Helms & Cook, 1999; Phinney, 1990) focus mainly on an individual's linear attitudinal progression toward bicultural integration.

Participants in this study spoke of multiple levels of separation from community, family, language, and culture, and the means by which they attain and maintain their cultural identities within the Canadian milieu that oftentimes distort their realities. The hindrance of Aboriginal cultural identity occurred in contexts where participants were deprived of social, cultural, or familial connection. One recommended corrective intervention to such conditions is to create and foster group connections that serve to ameliorate negative information about Aboriginal peoples and culture. One such way to achieve this is through all-Aboriginal group formations led by Aboriginal group facilitators, as Aboriginal contexts seem to reduce cross-cultural distortions (Anderson, 2000). Many participants expressed being displaced from sources of cultural validation. The colonial displacement of Canadian Indigenous peoples from a land-based culture affects cultural identity, and identity can be viewed as a fluid progression

toward or away from land-based culture where nature, history, stories, and a cohesive cultural collective are situated.

### CONCLUSION

Aboriginal identity is important in counselling and healing settings within Aboriginal communities. Pride in Aboriginal identity is part of the basis of overcoming addictions, especially when shame in identity is facilitative of chemical dependency (Restoule, 1999). Minority identity models are based on the theory that anxiety decreases as identities become integrative of one's home and host cultures (Atkinson et al., 1998; Cross, 1995). Counselling psychologists use these models in order to assist clients ease the transition into one culture from another (Ishiyama, 1995; Ishiyama & Westwood, 1992). Healing resources for Aboriginal people are found in connecting with culture, nature, ceremony and other aspects of indigenous culture (McCormick, 1994; McCormick & Gerlitz, 2008). These resources are, of course, more accessible to those who are more connected to their families, communities, land, and culture. Appreciating how these life areas interact with Aboriginal cultural identity informs our approach as counsellors, helpers, and educators, and helps to underscore the relevance of group work in reclaiming family, culture, and community.

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