

**Land as Place-maker, Land as
Medicine:**
Integrated Community Health and Earth-Based
Healing
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Abstract

This work concerns the emotional healing properties of the earth imagined through an anti-colonial lens. Its aim is to think about the potentialities of alternate methods for personal and social change—methods that challenge normative investments in Western rational knowledge and cure. It reaches beyond individual trauma, colonizing therapies and considers how generational suffering can be addressed, in Dian Million’s words, when “people understand their knowledge as inextricable from their lived experience in their distinct places, in spiritual relationships, with land and life, and from traditions that change but are millennial” (2013, 13).

Throughout my research, and specifically in my “Knowledge-Ways” component, I lean heavily upon Indigenous ways of knowing that prioritize the process or journey over arrival or end product. Knowledge understood through journey is not pre-determined, often spontaneous, and does not privilege outcomes. Where Indigenous perspective tends to value knowledge made through story, journey, experience and a relationship to the land, Western knowledge values positivist, empirical and results-oriented methods.

The purpose of this research is not to create a one-size fits all way of thinking about healing but to create alternate narratives and ways of thinking to the dominant western medical model. This research will explore the earth and its relationship to health and spirituality, broadening the scope of what’s possible for urban marginalized communities. It also explores the challenges faced, particularly among urban groups, to secure land, funding and recognition for the value of earth-centered programs.

My literature review takes up earth related knowledge gleaned from the fields of ecopsychology, critical urban studies, and Indigenous studies. While research in ecopsychology demonstrates empirical evidence that support the healing qualities of the earth, my project demonstrated the necessity for an anti-colonial analysis of earth-based healing.

My personal narrative essay documents the journey that led me to a project on earth based healing. Through story and art, I describe how my arrival is made from difficult experience, political insight and spiritual growth. Personal narrative, as a methodological approach allows space for non-traditional knowledge-making. In story and art, emotional knowledge is transmitted and difficult experience is processed through the telling. My personal narrative situates me, the story-teller, as knowledge-maker.

Finally, I developed a workshop module for facilitating an earth-based healing group. The module outlines engagement strategies, brainstorming activities, knowledge sharing exercises, story-telling circles, artistic mapping activities and closing ceremonies. My hope is to create a workshop template that is flexible in nature but that embodies key strategies for creating space that fosters meaningful community connectedness.

Foreword

This research provides a thoughtful exploration of how encounters with the earth supports and improves the health of individuals and communities. It focuses on community health, land access and social justice. Indigenous Studies help guides this research to give the project its political context, particularly around the problem of colonizing therapies. This project also draws on Indigenous ways of knowing to formulate an understanding of earth-based healing.

I have addressed three learning components in my plan of study (Earth-based Healing; Indigenous Spirituality; Social Equity, Community Development and Individual Wellness) through this research and in combination with my coursework. This research completed the following learning objectives:

1.1 Acquire a working knowledge of the challenges of inaccessibility to land and the social and structural implications that this has on community well being.

I have gained a deeper understanding of the barriers that exist for low-income, marginalized individuals around access to urban space, land and supportive healing outside of institutions.

2.1 Acquire a working knowledge of major philosophical and political theories of social injustice and the role of arts-based healing.

My research drew on theories of the biopolitical management of life, indigenous philosophy and anti-colonial theory.

2.2 Gain insights into the physical and psychological response to the natural world and the benefits of human encounters with the earth on community health

I conducted a literature review on the positive psychological impact of earth-based experiences. I represented, multiple disciplines, both indigenous and non-indigenous.

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Knowledge-ways

A Story: *When I was young, my friend CeCe and I would spend our summers exploring and playing the long days away. We would take our bicycles out for hours on end, discovering all the “secret islands,” gullies and natural wonders of the Sydenham River in Alvinston, Ontario. We were veterans of that old ghost town. We carried matches for removing the odd blood suckin’ leech from our ankles, and along with a beaten-up jackknife, we would bust into mussels buried in the sand in hopes to someday find a pearl. CeCe had three older brothers, whereas I had only two to fend against. I guess you could say we were tough girls in that town; and I guess you could say that you had to be.*

The town was rough and you learned to spit and swear at age eight—just to survive the place. The streets reeked of bar brawls, delinquent youth and the sounds of hungry stray cats. In retrospect, CeCe and I were looking to the river to teach us about ourselves, about how to be strong and how to not let our troubles get stuck in time. We learned to honor the process a river takes to feed into greater waters: the highs and the lows. Even when the river was at its low, it still was a palate for our imagination and for play.

I remember a game we used to often play. It wasn’t a competitive game; there was no counting, tallying or even winning. After gathering our household’s empty tin can collection, CeCe and I would meet at the gulley, ghost-ride our bikes into the bushes and head to where the road overpassed a small stream that fed into the Sydenham. We didn’t waste any time dumping the contents of tin from our sacks into the stream. We would then run up and over the to east side of the overpass, down the hill and sit down in the shabby

grasses and wait. CeCe, more out of breath from her asthma, would giggle in anticipation while I watched the opening of the steel siloes from which the water streamed out. To our delight, every time the cans would come barging through, they would echo a harmony of “Ting, Ting, Ting’s”. CeCe and I would collect all the cans, return to the west side of the gully and repeat these steps all day for many years. It never got old; the wonders of the river never grew ordinary.

The river and land in retrospect has had a greater impact on me than the education system I was streamed through since childhood. I grew up in a working class town where our working class-bodies were never imagined for anything, other than manual labour or child rearing. It was through my relationship with the land that I grew aware of my place and value to the world. I didn't know it at the time, but the river has weaved its way through my life – gifting me with knowledge, healing and wisdom along the way. Because the knowledge I have acquired in life has been sought out through alternative means, it makes sense that my research also encompasses non-traditional ways of knowing. Stories, art and imagination help me to navigate the world and to answer important questions. I use these same forms throughout these essays to help me make meaning of the past and assign meaning to the future.

In *Research Is Ceremony*, Indigenous scholar Shawn Wilson explains the reason why he prefers the identity of “storyteller” over “author” or “researcher.” To avoid the pitfalls of cold objective research, he suggests that researchers need to impart their own story so that listeners know what the researcher is invested in and can “filter the story being told through their own experience” (2008, 32). Not only does this method feel more

culturally appropriate for Wilson, it speaks to research as a relational process. It's the relational element that can make the research process healing and ceremonial.

Additionally, as Leslie Brown and Susan Strega (2008) argue, in their Introduction to *Research As Resistance*, how challenging the power dominance structures that exist in mainstream research can be a "basis for political action" (2008, 10).

For me, Wilson humanizes research and shows how it can be conducted in mindful ways that acknowledges the historical damage it has made and often continues to make. Wilson argues that using an Indigenous perspective is not enough though. Indigenous research "must leave behind dominant paradigms and follow an Indigenous research paradigm" (2008, 38). In response to the vicious role that research has played historically in the colonization and oppression of Indigenous people, he offers nuanced methodologies that strive to honor and protect Indigenous rights of self-determination. Particularly interesting to me is Wilson's position on the ethics of representing others' stories. He writes: "A problem with writing down stories is that it makes it very difficult to change them as we gain new learning and insight" (2008, 22). Margaret Kovach explores this when looking at the depths of Indigenous epistemologies. She describes Indigenous knowledges as fluid, experiential and therefore not static. She notes that knowledges and teachings are often oral and based in story. These stories are passed from generation to generation through relationships (2005, 26). Kovach points out, "Values that honor relationships are important for cultures that value the journey as much as the destination" (2005, 27).

How can research possibly give justice to the histories of colonized people and the traditions embedded in them? What does it mean to record people's stories when the

story is always evolving? As a researcher, how can I honor the changing story and resist the temptation to close stories by finding answers to difficult histories? We are evolving beings, like the flow of rapids, knowledge is mobile so we must not let the stories get stuck in time. Our stories can help heal us, but they can also harm us if we are not careful. Thomas King speaks to the dangerous nature of stories in *The Truth About Stories* when he writes, “For once a story is told, it cannot be called back. Once told, it is loose in the world. So you have to be careful with the stories you tell. And you have to watch out for the stories you are told” (2003, 10).

Healing Through Stories

Richard Wagamese (2014) in his acclaimed novel, *Medicine Walk*, writes about a young Indigenous man’s relationship to the world from the legacies of deeply rooted family and colonial traumas. Franklin Starlight’s [the young protagonist] world revolves around his estranged alcoholic father who abandoned him, his dead mother who he never met, the “old man” who raised him, and the land that healed him. Wagamese brilliantly displays the ways in which people can survive trauma in radically diverse ways and unravels the complexities of intergenerational injuries. Where some people numb from their trauma with substance use, others, like Franklin, avoid the “dull ache when he thought of [his father]” to defend himself from loss. Franklin, who learned how to be “enveloped by land” (Simpson 2014, 9), is a teenager when his father, Eldon Starlight, summons him to go on a journey into the backwoods at a spot 40 miles away in preparation for his death. Eldon wanted to go out with dignity on a cliff-side facing east in warrior position; this was his desperate attempt to also connect with his estranged

Indigenous ancestry. Though reluctant and angry from loss, Franklin agrees to his father's wish. Franklin's willingness to nurse Eldon, even as he was full of judgment, can still only be described as brave. To care for the man who had hurt and betrayed him implies an openness to forgive, to grow and ultimately heal. Perhaps, Franklin was yearning for answers to the gaping holes in the fabric of his life and family history. Perhaps, he had sensed the relevance of stories to his survival because as Thomas King reminds us "that's all that we are" (King 2003, 2). Franklin eventually would come to understand that the journey with his father would be an opportunity to learn more about who he is and where he's from, shedding a light on the holes that riddled his own story. Slowly, Franklin would realize that not only he had experienced loss and tragedy in life but so too his father.

Over the course of their journey, Franklin hears many stories about Eldon's horrific life: how Eldon lost his own father to WW11, how he became a workaholic and an alcoholic while supporting his mother at a young age, how he killed his best friend for hurting his mother (who he would never see again), and how he slept with his boss' lover, who became pregnant with Franklin. But the story that might have been the hardest for Franklin to hear is the story about the death of his mother. Franklin's mother died during his breached birth. While his mother labored on the kitchen floor, Eldon was out drinking. Franklin learns that his father felt responsible for his mother's death because if he had been with her and not on another relapse at the bar, he would have gotten her to the hospital sooner. Eldon, apparently, couldn't cope with the idea of living with a reminder of his wrongs so he handed over his newborn son to his only real friend, his boss Bunky, the man he had betrayed, who at the end of the novel we learn is in fact "the

old man” who had raised Franklin. After learning his father’s heart-wrenching tale of how he has survived a difficult life, Franklin ponders, “The skeletal man who slept in front of him [his father] seemed to resemble nothing of the man who’d walked through the tale he told. He wondered how time worked on a person. He wondered how he would look in years on and what effect this history would have on him” (Wagamese 2014, 232).

Wagamese’s story reveals the strength of human survival in the face of trauma and the identities that are shaped by loss and displacement through colonial interference. It speaks to the impacts of colonization from the past and present, which translates into broken relationships, fragmented histories and haunting ghosts for the main character. Franklin learned everything he knew from his father’s friend Bunky, who taught him most notably how to form a relationship to the land. Despite Franklin’s disappointing relationship with his father and the death of his mother at birth, he found himself through his relationship to the land, which gave him the strength to eventually love his father. His lone hunting journeys into the back woods for days and weeks were a playground for him to heal. Wagamese writes, “Asked to explain [his relationship to earth], [Franklin] wouldn’t have been able to, but he understood how it felt against his ribs when he breathed night air filled with the tang of spruce gum and rich, wet spoil of bog. That particular magic that existed without words, beyond time, schools, plans, lofty thinking, and someone else’s idea of what mattered. The kid went to the land. It was all he needed.” (2014, 38)

Franklin’s survival came through the unspoken knowledge he gained in ceremony with the land, and not from what he learned in institutions, books or from family. While Franklin found his comfort in the land, Eldon was without a place to put his pain; his life

was full of empty holes that never got filled. At one point in the novel, Franklin asks Eldon why he hadn't turned to the land when his life was spinning out. His blunt response was that, "You get beat up good enough you don't breathe right, ... White man things was what we needed to learn if we was gonna eat regular. Indian stuff just kinda got left behind on account we were busy getting' by in the world." (2014, 49). By leaving Franklin with Bunky, Eldon spared him the torch to the life of pain, poverty and struggle he had to endure. It gave Franklin the freedom to live in ceremony with the land and to "thank the mystery for the mystery" (2014, 38) without baggage. Franklin's life was still tremendously impacted by colonial damages, such as his damaged relationship with his father, his failed attempt at fitting into western education systems and his lack of connection to his Indigenous ancestry; but the difference between Franklin and Eldon is that Franklin was living in the most decolonial way possible: on the land, as his ancestors had lived before European contact. Money, media and capital did not infiltrate his life in the same way; the earth is what blanketed him. The mystery of the earth consoled and supported his every breath. It kept him alive and strong, and provided him relief from his father's life of complex trauma, emotional numbing, poverty, and suffering, albeit not without a cost of course.

Leanne Simpson (2011) may call what Eldon did, leaving his son with Bunky, an act of "resistance" or "survival." Survival, Simpson explains, is an act of resistance when the life you've been handed down is hard and unlivable (2011, 15). In Simpson's own words: "My ancestors resisted and survived what must have seemed like an apocalyptic reality of occupation and subjugation in a context where they had few choices. They resisted by simply surviving and being alive. They resisted by holding onto their stories."

(2011, 15). Simpson asks us to redefine what we consider “resistance” in a situation where merely surviving and holding onto one’s stories is cultural preservation and life saving at its core. Similarly, Eldon also thought it best to pack up his seeds from the past and save them for later, as his stories were too painful to sort out in just one lifetime. Indeed, he buried his stories until the last possible moment, literally when he was on his last few breaths. Because he knew that his stories also belonged to his son, in the end, Eldon made sure that he didn’t leave his son with emptiness. His final gift to his son was to give him his life story through a brave journey of remembrance, creation and forgiveness. Despite the state of Eldon’s decaying poisoned body, he still chose to embark on his personal journey through the bush where he knew he would have to make himself vulnerable to his son for his physical care and survival. Over the course of the journey, Eldon’s body progressively withered away under the gentle and nourishing hands of his son. Franklin’s disappointment in his father never interfered with the way he tended to his father’s body. As for Eldon, the stories he had harbored inside of himself for decades were finally shared on the journey through the woods. It is in the woods that Eldon’s vicious cycle of turning pain into forgetting began to repair in relation, which is to say in the act of bringing his stories to the light for his son’s own taking. In this act, Franklin would finally understand his father’s fragile story of survival from the hardships and legacies of colonization. Indeed, Eldon’s early experiences of loss, poverty, addiction and trauma cannot be disconnected from the hundreds of years of displacement, alienation from land and from the attacks on language, knowledge and culture his ancestors endured. Since all Indigenous peoples’ loss originates with loss of land, it makes sense that Eldon would go back to the land with his son to rest his pain and

trauma. Leanne Simpson's notion that, "Storytelling is at its core decolonizing," (2011, 33) is an important way to understand Eldon's actions and insistence on not leaving his life on earth without leaving his son a most valuable inheritance: a story that would sustain him, nourish him and provide him with tools that he might need for learning how to go on living.

Indigenous ways of knowing prioritize process or journey over arrival or end product. Richard Wagamese (2011) recalls a teaching he once received from his friend Jack in a short story entitled, "On The Wings of Eagles." While marveling at the stunning precision of a mature eagle in flight, Wagamese expressed to his friend Jack that he wishes he could be as graceful as the eagle. In response, Jack pointed out that Wagamese was admiring the display, but what was more significant was "how the eagle learned to do that." Wagamese expands on Jack's teaching and points out that the eagle's grace did not come easily. The eagle learns to read the wind, control its millions of feather filaments according to wind patterns and must eventually take flight from its nest on a courageous leap of faith. This story asks us to reevaluate our relationship to knowledge: why do we tend to be impressed by the eagle's skill or its acquisition of knowledge rather than the brave efforts that it takes to get there. It asks us to rethink knowledge from something we obtain and possess to something that we experience through lived encounters and through having an embodied and holistic relationship with the earth and with all that is around us.

Knowledge understood through journey is not pre-determined, often spontaneous, and does not prioritize outcomes. Where Indigenous perspective tends to value knowledge made through story, journey, experience and relationship with the land,

Western knowledge values positivist, empirical thinking and results-oriented practice. Richard Atleo (2007) offers insights into a predominant difference between Indigenous and Western ways of knowing, wherein he explains how modern civilization required the letting go of ancient origin tales to make way for positivist theories. Atleo explains that Western philosophy turned to scientific knowledge over stories for truth. This requires isolating knowledge in parts and overlooking larger knowledge systems (2007, 13). Conversely, Indigenous theory provides a basis for existence and meaning through an origin story (2007, 11), providing an “ontological context” (Simpson 2011, 32) for interpreting our lives. Thomas King (2003) similarly sees origin stories as “containing relationships that help to define the nature of the universe and how cultures understand the world in which they exist” (2003, 10). If stories are how and where we discern our reality then we ought to be careful of the stories we hear and share in. That is because, as King explains, “stories control our lives” (2003, 9) and that there are some stories that can imprison a person for a lifetime. Arguably, Eldon Starlight changed the story that kept him numb for 50 years when he was finally able to talk about the dark events of his past. It was in the woods that he finally rests his wounds and finds language for his emotions. In Robin Kimmerer’s words, “...the life that pulses through all things, through pines and nuthatches and mushrooms. This is the language [we] hear in the woods; this is the language that lets us speak of what wells up all around us” (2013, 55) and inside us.

There’s a mystery to the earth in that it provides us language to pain and pathways to healing. For those who have been dispossessed from their land through colonization and capitalist greed, healing does not necessarily come easily. It took Eldon almost his entire life to get to the land. But as Franklin teaches his father in the novel, people need to

“move through the fear” and come to the medicine [the earth] on their own leap of faith (Wagamese 2014, 111). Our stories live in the land and can be found in the land. In sharing his stories, Eldon offers his son a deepened understanding of the land. He injects his stories into the only landscape his son has ever known and invites him to have a new relationship to it. After Franklin buried his father, he returned to his home with Bunky. Franklin admittedly felt an emptiness in his heart and asks Bunky how he can cope with the weight of the world on his chest. Bunky recommends he goes to where the wind blows. Franklin saddles up and rides to the fields where his father once roamed. When night falls, Franklin is struck by a ghostly vision of his father, his mother and a parade of other people he never knew. They were gathering berries and singing along the river’s edge. Franklin was acquiescent of the gifts his father left for him in the land. Through his father’s stories, Franklin was able to connect to his relatives, ancestors and to the past. I think this gets to the core of how stories are vital to healing, so long as they’re told, passed on and revisited with new life.

Knowledge made through journey stays with us for the rest of our lives; their memory thrives in all our senses and return with fresh insights. Thinking back to my childhood and times with my friend CeCe, I still feel the hot wind on my back, taste the sweat beading on my lip as I labor my day down at the stream, hear the sound of cars zooming by overhead, and am aware of the pit of hunger in my stomach that has become as familiar as a sibling to me. My story reminds me of how I like to hide, something that I still do today. I enjoy taking that long, windy back-road alone at dusk. For Franklin, it is at dusk that the magical spirit world awakens for him. There is knowledge to behold here but it is embedded in nature, dreams, and visions. The path to knowledge is not

straightforward; it's messy. And the more we go off the path, the more lenses there are to view ourselves through and the more learning there is to be had. These paths would take us on an adventure towards places of healing away from the cold and dehumanizing institutions and into a space where old stories bridge new beginnings. I'm mindful now to always leave a pause for tomorrow where the next story may begin.

The Science and Spirit of Earth-Based Healing

A Story

Kenny¹ was struggling to maintain his housing due to complex mental health and addiction related issues. In an attempt to avoid his daunting health care needs, he often disappeared for days at a time. Kenny became involved in a garden group shortly after being housed in a temporary housing program. Within weeks, it became noticeable how committed he had become to the community garden, particularly invested in the worm compost, which he tended. His relationship to the worms seemed to have a calming effect. It also became obvious how the work gave him a sense of accomplishment and pride. In a video made about the gardening program, he describes his experience as “interesting.” He expressed that the worms kept him communicating with life and relied on him to feed and take care of them. Kenny was particularly impressed with how they don’t bite him or get mad when he touches them.

It was rare for Kenny to miss an appointment with the worms or his gardening community. Eventually, he rarely missed an appointment with me, his housing worker. His primary care team also saw improvements in making his medical appointments. Tending to his worms seemed to have an effect on how he tended to himself. It’s not an exaggeration to say that in the case of Kenny, community engagement sprouted a new beginning for him. The community garden nourished him in unexpected ways because it gave him something to care and be responsible for. Not only was he caring for the worms, he was caring for himself and for the community which he now felt a valuable part of. The change was profound. He has since graduated from the program and resides

¹ Kenny is a name I chose to represent a garden group Member. This story is a combination of details of multiple garden group participants who allowed the garden to teach them.

independently in the community. Still an active member of the garden group, Kenny is in better control of his health and substance use. His story speaks to the therapeutic value in community-based interventions for marginalized people, and particularly the value of how social bonds and inclusive communities are made through gardens and collective green space projects.

What is unique about this community garden was that all the participating gardeners were previously homeless, and had unfathomable experiences living in harsh environments. Nestled between high-rise apartments in Toronto's densest low-income housing developments, this garden was sanctuary to some expert growers and self-healers. What is also interesting about this group is that many of the participants had land-based knowledge and experience from other countries and regions. They shared unique stories and memories, which made for interesting conversations and community bonding. Many, it seemed to me, found refuge on that patch of land, making sacred connection to the earth's healing and to each other. This was evident in the stories of hardship, love and survival that came out while tending the land. During their time they spent on the land, street politics were left to the street. While this type of open and trusting engagement might not seem like such an accomplishment, for this set of individuals it was remarkable.

I begin with Kenny and this magical garden because it opens up the question of what is possible when a meaningful connection is made to the earth. What does Kenny get from the experience of witnessing his worms grow and from watching his worms feed the entire community garden? How does having the responsibility of keeping the worms alive impact Kenny's outlook on community and his sense of belonging? It would seem

that profound experiences unfold when people come into contact with nature, and perhaps in particular with growing plants. If there is such a thing as nature deficit disorder², does growing plants and spending time with living nature create the conditions for healthy communities?

Prior to the “pharmaceutical boom” in the 1960’s, doctors frequently wrote prescriptions for time outdoors to patients experiencing symptoms of depression and anxiety. It was a well-known effective remedy (Selhub and Logan 2012) In fact, the people experiencing the most emotional stress have the most to gain from time spent in nature (2012, 117). This remedy, however, was of course cost-free to the patient and did not generate capital for the pharmaceutical industry. The healing practice and philosophy of “time in nature” as a mental health intervention has since become lost. Somewhere between the colonization of land, capitalist interest, neo-liberal institutional practices, and modern technologies, we no longer treat encounters with earth as having therapeutic or spiritual value.

This literature review will consider the ways in which having contact with nature can have profound impacts on the health and wellbeing of disenfranchised individuals and communities and draws heavily, though not exclusively, on Indigenous Studies. Indigenous knowledge treats “land as pedagogy” (Simpson 2014, 14). In other words, earth and its perceived medicines are the source of knowledge and central to Indigenous tradition. Though this knowledge has become undermined by colonial interference, Indigenous communities continue to turn back to that knowledge to heal from colonial injuries. Indeed, knowledge itself is a site of injury for Indigenous people because

² A term coined by Richard Louv to describe behavioral issues among children that have limited interactions with nature and spend too much time using electronics to entertain.

colonization has threatened their ability to hold, practice and pass down sacred and ancient ways of knowing. Leanne Simpson in *Land as Pedagogy* (2014) makes this point when she critiques western educational institutions where knowledge is prescribed and violently imposed. In Simpson's Nishnaabeg community, elders do not act as knowledge keepers, but view themselves more as learners. Knowledge is not owned by anyone; rather, it lies within the land. Though elders have had years of reading the patterns and discerning sacred knowledge from the earth, it is the earth itself that is regarded as the ultimate provider of knowledge. In Simpson's words, "education comes from the roots up. It comes from being enveloped by land" (2014, 9). Indigenous studies lends itself to my project in ways beyond earth-based knowledge; it informs the political context to the conditions we are all living within – the capitalist, colonial context that cuts people off from the earth, as it scorns the value of old traditions all the while pharmaceutical companies profit from the vulnerable.

The following will begin by reviewing some of the scientific and empirical studies that show the effects of earth-encounters on mental health and then proceed to discuss the colonial context that has undermined the reciprocal relationship we have with the earth. I'll end by discussing Indigenous ways of understanding this reciprocal relationship.

Nature's Impact: The "Evidence"

The experience of growing plants can help to highlight what is actually essential to our happiness: physicality, spirituality and relationships. Encounters with the earth can help grow bonds between neighbours and improve people's sense of community. According to Eva Selhub and Alan Logan (2012), interacting with the earth promotes

positive physical, social and mental health benefits. When we form a relationship to the land, we take on the responsibility of learning about ourselves through caring for and observing the earth. Selhub and Logan explain this through “attention restoration theory,” that is, that nature has a way of alleviating life’s stressors, making space for personal and cognitive growth (2012, 63). Additionally, their research shows earth interactions improve cognitive functioning of the brain through sounds, light, plant aromas, contact with soil microbes and the peace and quiet found in nature (Selhub and Logan 2012). More specifically, studies have shown that viewing nature scenes stimulates the anterior portion of the brain (rich in opioid receptors), promoting increased levels of dopamine rewards and thus leaving a person feeling more positive, less stressed and better able to motivate change. Selhub and Logan describe these phenomena as nature’s “little drop of morphine for the brain.” (2012, 28) This critical finding means that people with physical pain conditions, opioid dependencies or depression³ could benefit from time spent in natural environments. And, with a 1 in 4 chance of acquiring depression in the US (2012, 40), it is medicine worth exploring.

While “evidence” of nature’s impact on health doesn’t require empirical studies, it is interesting to see that time in nature can mimic the effects of top selling pharmaceutical medications for ADHD, anxiety and depression, while diminishing road rage symptoms and improving impulsivity (Selhub and Logan 2012, 72-74). Richard Louv (2008) and Kathryn Rose et. al. (2008) examine the consequences of children not getting enough time outdoors and the ways this impacts their development. Louv explains that children (9 to 11 years old) are “wired” to technology, spending on average 50% less time

³ People experiencing the effects of depression have shown a decrease in activity in the anterior parahippocampal gyrus region of the brain during magnetic resonance imaging (MRI)(Selhub, Logan 2012)

outdoors doing recreational activities from 1997 to 2003 (2008, 34). “Nature deficit disorder,” he argues, is the leading cause in child obesity, depression, hyperactivity and stress disorders and claims that “direct exposure to nature is essential for physical and emotional health.” (2008, 35).

Kathryn Rose et. al. (2008) similarly researched the costs of children spending too much time indoors, reading and using screens. In their report, *Myopia, lifestyle, and schooling in students of Chinese ethnicity in Singapore and Sydney*, they found that children who spent more time outdoors were less likely to develop degenerative Myopia, a condition associated with nearsighted vision in children and potential progression into blindness in adulthood. The presence of Myopia in the sample of children in Singapore was 29.1% compared to 3.3% presence in the Sydney sample of Chinese descendant children (2008, 528). Children in Singapore spent on average 10.7 hours per week less outdoors than the children living in Sydney (2008, 527). Much controversy circulated recently over myopia being linked to genetic causes versus environmental causes and its persistence in East Asian cities (2008, 527). This study was revealing because it showed a dramatically lower rate of myopia in children living in Sydney, Australia despite still having a genetic link to the condition. Myopia is not only a growing concern in urban East Asia but it is also on the rise in the United States. Myopia’s presence rate in the United States was only 25% in 1971-1972 (ages 12- 54), in 1999-2004 it grew to 41.6% (Vitale et. al. 2009). It would seem that children around the globe are losing connection to the outdoors and suffering these impacts. Removal from nature is a growing problem faced by many, not just children.⁴

⁴ Jane Clark coined the term “containerized kids” as a way to describe children’s isolation and distancing from nature (as referenced in Louv, 2005). More specifically, urban parents concern Clark for their over

Scholars like Louv (2012), Broadway (2009), Buhner (1996), Selhub & Logan (2005), and Suzuki (2007), among others, convincingly argue that land-based interventions work to improve mental health, especially in the context of a highly medicalized society, but they enter into the conversation without a social lens around who is most affected by mental illness. Their research also does not provide the socio-historical background of Western medicine's role in colonization and the structural barriers that make access to land a privilege.⁵ Indeed, their work fails to attend to marginalized, medicalized, chronically ill people, like Kenny, whose goals and needs are complex and intertwined with social inequalities, barriers, colonial traumas, stolen language and culture, which have complexly resulted in sustained crisis and homelessness. Selhub and Logan, in effect, examine the benefits of nature for a demographic of middle class people affected by mental health, where work productivity, concentration and reduced stress are the desired outcomes. For people like Kenny, where basic human needs are unmet and whose daily struggles include access to safe and affordable housing, food security, managing chronic illness, systemic racism, social isolation, violence, police brutality and chemical dependencies, land access and healing comes with a great deal more challenges.

utilizing of safety mechanisms which contain/restrain children's freedom with strollers, highchairs or car seats. Her problem is not with the safety equipment but that some children spend most of their life contained. The term paints an image for me of the problem with and its potential impacts on children. A child in a container is kept sanitized and has limited exposure to the changing world. How can a person transition into a secure, confident, capable person if they are never let off the leash? The term "containerized kids" makes way for larger questions and more imaginative remedies.

⁵ Though Louv (2005) problematizes his own medical framework when he concedes that his own term, "Nature Deficit Disorder," is pathologizing, he does little for exhibiting an understanding of the multiple other issues and difficulties that effect those that are most alienated from nature. Louv's term effectively plays into the hands of the disease model of thinking, where disability is defined by a deficit in physical, intellectual or psychiatric function, without a consideration for the social construction of the disability. Diagnosing people with more disorders and diseases is not likely going to have them running to the woods for healing. The disconnect between the socialized child and nature can be repaired with a shift in our thinking around the question of disability, medicine, nature and our role in it.

More complex than the obvious urban demand for space and the limited number of community garden plots are the problematic systems that govern “public space.” Legislations such as “the Safe Street Act” in Toronto create social-political barriers for people like Kenny to even visit a community garden site. This legislation introduced in 1999 by Mike Harris, allotted police the power and discretion to ticket and fine a homeless person for “aggressive panhandling.” Beyond the physical barriers that exist for people, there are invisible barricades in place that are designed to “protect” society from homelessness. Some of the more overt anti-homeless tactics are found in “defensive architecture,” whereby invisible spatial barriers are drawn with the use of spikes, razor wire, water sprinklers and more. Our institutions and systems are failing to provide safe and dignifying spaces for vulnerable communities to gather; instead, people are expelled into situations of great dependencies.

Understanding the root causes why people are distanced from nature and suffering medically leads to larger conversations around the continued violence of colonial history, biopolitics and the costs of capitalism. It is these larger discussions that will bring us closer to knowing the multiple ways we have damaged “nature,” damaged our relationship to it, and injured all the people resisting the conversion of the land into a financial resource.

Colonizing Therapies

You can't really heal the people unless you can create security related to food, clothing and shelter. Unless we can address the real economic development challenges, complete healing remains out of reach.

Anonymous Resident, Alkali Lake (Million 2013, 120)

In Canada, we cannot talk about the relationship to land without considering the damages of settler colonialism. Colonialism is imbricated not only in the conquest of people but the conquest of land: the desire to own the air we breathe, the land we walk on and the water we drink. Thomas King (2012) reminds us that the colonial mission was also about abolishing the traces of life that existed on the colonial path with a goal to capitalize on nearly everything. In King's words: "Trees, lakes, rivers, mountains, swamps, deserts, bays, islands, animals, plants, birds, minerals. Indians" (2012, 80) were all subjected to colonial violence. Settlers crafted manipulative strategies of assimilation on Indigenous peoples as a means to accomplish land domination and to capitalize on natural resources. In addition to the myriad of ways the government sought to abolish Indigenous people through the Indian Act (prohibited traditional practices and religious ceremony, displaced communities, create residential schools, spread fatal disease, expropriated Indigenous land and resources, etc), King reminds us that only 50 years ago it was illegal for Indigenous people to even wear regalia and express themselves culturally. As for land rights, Indigenous people have had the right to occupy land but have never been given legal title.

Derek Gregory (2001) walks us through how colonial discourses are embedded in present-day productions of space and constructions of nature. The Industrial and Scientific revolutions, he explains, created a context where Europeans imagined their orderly dominance over nature as a basis for “othering” and ultimately colonizing the lands of other nations. In other words, rendering the land in need of “taming” or “domination” set the stage for turning land into an exploitable commodity. Nature became a symbolic marker that separated the colonizer and colonized (2001, 98). Producing foreign territories as “bewildered” and “wild,” these descriptions were also assigned to describe the people who lived on the land. It wasn’t long before the “bewildered” Indigenous inhabitants were also objects that required taming. Nature became a theatrical production, describes Gregory, a staging of sorts, where “non-modern” landscapes were a perfect “blank” canvas’ to occupy, domesticate and modernize. This, Gregory explains, “makes nature available for inspection, codification, calculation, and regulation” (2001, 93). Indigenous people remain invisibilized and erased from the landscape in the postcolonial context. Though colonialism has officially ended with the Canadian Charter of Rights, the epistemologies that dominate Indigenous peoples persist in separating Indigenous people from the land, legitimizing the administration of the land and in normalizing hierarchical relationships (Braun 1997).

Colonial medicine has played a key role in separating Indigenous people from the land and their belief in its sacred value. As early back as the 16th century, European imperialism relied on science and medicine to exploit resources, manage populations and to subjugate Indigenous people (Marks 1997, 210). Western medicine was both a tool to colonize and a colonizing practice. As a tool to dominate, Western medicine was

produced “as a triumph of science” (1997, 205) over traditional medicine. To this day, Western medicine mocks traditional healers, de-valuing and labeling them superstitious at best and ‘barbaric’ (1997, 206) at worse. Colonial medicine’s power lay in its ability to enhance its superiority and authority over its colonies and to pathologize and undermine non-white races in eugenic constructions (Marks 1997). In more directly harmful ways, colonizers introduced germs to the colonies (1997, 209) that proved to be quite lethal, arguably, genocidal. For instance in Haida Gwaii (a group of islands off the northwest coast of British Columbia), infectious disease claimed an estimated 6300 of the 7000 Indigenous residents shortly after contact in 1774⁶. With only 700 Haida survivors, defending their land, culture and ways of life was almost impossible.

Indigenous people’s bodies continue to be colonized medically through institutions, legislations, diseases and 7 generations of state-inflicted violence and trauma. Foucault et. al. (1975-1976) discusses biopolitical power, that is, the way in which populations are managed to “safeguard” society, fostering the right to take and give life (1975-1976). Mainly focused on Nazi extermination camps (industrialized killing) and slavery (instrumentalization of existence,) Foucault reveals how the nation state exercises power over bodies. Achille Mbembe (2003) expands on Foucault’s concept of biopolitics with his theory of necropolitics, a term that contextualizes deeper the influence of race and class in determining who lives and who dies. He asks: “What is the relationship between politics and death in those systems that can function only in a state of emergency?” (2003, 16). If applied to Indigenous peoples in Canada, I would argue that the state sanctioned response to the impacts of colonization guarantees

⁶ Statistic collected from Haida Gwaii Tourism website: <http://www.gohaidagwaii.ca/our-islands/cultural-history>, accessed July 3, 2015.

Indigenous peoples go on living, but the life they are “given” is not a livable one. In the neoliberal context of charity, selected Indigenous, racialized and working-class people live in sustained crises, solely dependent on the social service industry to maintain life. Adversely, the social service industry employs and feeds the economy on the backs of indigent populations. As Craig Wilse puts it: “*that which is ill or dying does not need to be eliminated to grant biopolitical life to a population.* The activity of dying, of being ill, offers *economic* life and productivity, as a matter to be neo-liberally and biopolitically managed.” (Craig 2010, 180)

In his work, Willse (2010) examines “chronic homelessness” in the United States as the management of biopolitical life. He explains that in the first phase of homelessness in the 1930’s, municipalities had introduced work-for-shelter establishments attempting to divide the deserving and undeserving poor. People had to show proof of being from that municipality in order to access these shelters, thus disqualifying the travelling poor from accessing shelter. The introduction of these faith-based shelters in the US was pathologizing, deeming people “incapable of self management,” and “failed selves that require intensive social assistance” (2010, 156). This pathology functioned to redirect conversations from the broader social-structural functions of poverty to discourses of demoralizing blame and shame. Furthermore, Willse articulates the means by which social service agencies are implicated in the management of bodies, allowing some people access while denying others. The people denied, typically racialized people, are barred from receiving social services and dejected into correctional institutions (2010, 166, 177).

Social services are operating with neoliberal objectives and are thus complicit in biopolitically managing populations; through gate keeping, they participate in a larger plan of racial subordination. This explains why in Canada, a disproportionate number of racialized people experience homelessness, incarceration, unemployment, police brutality, food insecurity, violence, and many other devastations over their white counterpart. Approaches like, “housing First” (a municipal housing model that grants priority housing to “chronically homeless” individuals) may seem radical and valuable in that they house “chronically homeless” people without requiring compliance to medical/addiction/mental health treatment, but they give power to social service agencies to determine who is “chronically homeless” and who is dangerous. For example, in the city of Toronto, outreach workers connect with individuals who are sleeping outdoors, complete an assessment, and determine if a homeless individual fits their classification criteria of “chronically” homeless. But who gets approached and who gets avoided? Dangerous people go to prison while “chronically homeless” people get immediate access to housing stabilization programs. I have seen this play out consistently throughout my five years as a housing worker in downtown Toronto where predominately white homeless people are referred to participate in transitional housing programs leaving behind the Black, Indigenous and racialized homeless communities.

Biopolitical management of life is not limited exclusively to housing in Canada, people on social assistance are given such an extremely low financial allowance that they are inadvertently kept in crisis and managed through multiple institutions to supply basic necessities for survival. Some examples of these institutions are shelters, churches, meal programs, food banks, health centres, drop-in centres, urgent care centres, clothing

donation centres, community social housing complexes, etc to offset the unlivable social support payments.⁷

Hunger is addressed and managed through food handouts, creating the conditions of great dependency. The food bank solution is another crisis robbing impoverished, disabled, working class and often racialized bodies of dignity and sovereignty. In addition to the devastating dependence created by food banks, oftentimes they supply nutritionally inadequate, culturally inappropriate, stale-dated foods that would otherwise be thrown in the garbage. This is exacerbated, explains Valarie Tarasuk (1999), by other “self-help” models of charity such as budget and cook skills training because, by implying people are mismanaging their finances, they blame low-income individuals for their plight. Tarasuk advocates for increased social assistance rates in order to directly address the root causes of food insecurity in Canada; namely, not enough money. Based on the current state of the welfare system, poor people in Canada remain nutritionally deficient (Tarasuk et. al. 1999) and in crises, though alive.

The situation is not improving; indeed, food banks in Canada doubled between early 1980 to 1989 soaring to 1.4 million service users (McIntyre et al. 2003; Tarasuk et al. 1999). Willse would likely agree that helping the industry that feasts off the deprivation of the poor is flourishing here in Canada, and undoing it would damage the livelihood of so many middle class Canadians. People are inadvertently invested in the existence of poverty. People are being given just enough funds to stay alive while the root causes of poverty remain unaddressed. The living dead: kept alive but not granted the

⁷ Another form of Biopolitical management of life happens with the mass-incarceration and criminalization of racialized and Indigenous bodies in the US and Canada. These bodies are systematically prevented from accessing basic social services and fundamental human rights. For a study on the US context, see Michelle Alexander’s (2011) *The New Jim Crowe*.

means to thrive.

Dian Million (2013) uses the term “industrialized healing” to describe the colonizing therapies of aboriginal peoples rolled out by the Canadian government over the past 40 years. More specifically, Million explains how neoliberal, self-help, psychology-based programs followed Canada’s 1986 declaration to expand the meaning and definition of health⁸, a definition that would now encompass the various social and political factors that would impact one’s health. Essentially, this declaration offloaded the responsibility of health onto individual communities under the guise of “community development.” Million points out, however, that funding structures never changed to support the new community development strategies; in fact, some funding declined following the declaration (2013, 101). This was the birth of the neoliberal governance in healthcare. The trauma and healing narrative became institutionalized and industrialized after this point, placing blame on the victim and resolving governments of any responsibility. As Million points out, neoliberalism is not simply a set of economic practices, but “ a governance and an imaginary that infuses ways of life” (2013, 147). The rise of Indigenous “self-determination” and healing therapies is part of that imaginary. Million insists that discourses keep people subjugated because they locate the crisis on individual Indigenous bodies and not on the systemic poverty that created the crisis in the first place.

For instance, the recent self-determination discourse, Million explains is a mere reincarnation of the government’s neoliberal healing agendas that have been rolled out on

⁸ The declaration was a direct response to a campaign launched by the United Nation’s World Health Organization that encouraged a more broad, holistic definition of health, a definition that included social development (such as, food, shelter, ecosystem, income, equity, etc)

reservations since the 70's. The first wave of healing was achieved through the disease model "12-step recovery" (2013, 120) programs. These programs tend to be moralizing and pathologizing in nature—they put the onus on the individual to heal themselves and shame people for falling off track during difficult times on their journey. Nowhere in Alcoholics Anonymous, Narcotics Anonymous or ALANON do they offer a political lens for poverty, addictions, trauma, or colonization. By pathologizing and individualizing healing from addictions and other injuries attributed to inter-generational trauma, Indigenous people again are re-injured by colonizing power relations, making way for biopolitical control over their bodies, their treatment journey and their healing (2013, 150). In pathologizing the vulnerable, Million warns, the stage is also set for further policing and colonizing of Indigenous bodies.

Million speaks to the importance of culturally appropriate services and systems. She describes the harm of western designed therapies, colonizing and neoliberal in nature, directed at Indigenous people who are living the complex effects of cultural genocide. Million critiques the Canadian government for its empty apologies and handouts to residential school survivors. Healing and self-determination is co-opted by colonial discourses of human rights to produce Indigenous peoples as medicalized victims (2013, 52). Indeed, for Million the trauma narrative of healing from wounds is mobilized to manage crises and therefore works against political and structural changes needed for social justice and collective healing.

Healing—what's possible—the magical

For Robin Kimmerer (2013), colonial and systemic barriers place a wedge between people and nature. In *Braiding Sweetgrass*, Kimmerer explains how language

alone can distance a person from nature by fragmenting their relationship to living beings. For instance, she describes how most Indigenous languages refer to animate beings (including trees, apples, stories, medicines, and most everything else derived by nature) as though they are people. The English language, however, leaves little space for respecting animacy because all things that are not human are simply referred to as “things”. The English language then inadvertently allows for the exploitation of natural beings and converts them into “natural resources” (2013, 37). The objectifying language promotes hierarchal thinking and undermines the ability of nature to teach and inform.

A healing decolonizing relationship with the earth is to view the trees and animals not as possessions but rather as teachers and “as holders of knowledge, as guides” (2013, 58). Kimmerer shares an understanding of the world that is vastly different to the possessive nature of western societies. Kimmerer’s world, as she describes it, is “a richly inhabited world of Birch people, Bear people, Rock people, beings we think of and therefore speak of as persons worthy of our respect, of inclusion in a peopled world...” (2013, 58). Expressing a deeply hopeful and reassuring belief, Kimmerer’s understanding of the non-human world as supportive, or family if you will, is therapeutic and even healing. Earth interventions are transformative, sacred and spiritual (2013, 125). She goes on to explain: “We don’t have to figure out everything by ourselves: there are intelligences other than our own, teachers all around us. Imagine how less lonely the world would be” (2013, 58).

In hearing Kimmerer’s words, I am compelled to wonder what this could mean for people who are outcast from their “peopled world,” in particular, people experiencing homelessness, poverty, and mental health concerns. Does this invite opportunity for new

family ties, knowledge sharing and spiritual support? Could isolated individuals find company and consolation in nature? Kimmerer's theory positions the earth as teacher and potentially sheds some more light on how the compost worms mentored Kenny. Perhaps his gains from the garden group had more to do with his interactions with his worm teachers and less to do with the group's "capacity building" objectives and instructors. Did the worms teach him about resilience? Or how nature can heal? Or that he is needed and accepted in the world? Kimmerer's teachings provoke me to question whether Kenny and the earthworms have more in common than I had initially imagined: misunderstood and undervalued in society. The earth's gifts could provide an intervention that is genuinely anti-oppressive, decolonial, community driven and spiritual in nature.

David Suzuki (2007) teaches us that spending time with the earth can translate into personal revelation and healing. He explains, "We are creatures of the earth, and everything we learn about the Earth teaches us about ourselves." (2007, 49) There is a silent, energetic healing conversation that can occur between human and plant. Steven Buhner (2001) would refer to this as communicating with plants and hearing their song. Buhner points out in *Sacred Plant Medicine – Explorations in the practice of Indigenous Herbalism* that we humans are actually a bi-product of plants since oxygen-breathing creatures couldn't have existed without photosynthesis. In light of this, trees and plants are our distant relatives. Buhner beautifully describes some of the earliest documented uses of plant medicines and the sacred ways medicine people came to know their powers. He explains that typically sacred plant knowledge was obtained through ceremony, prayer, visions and dreams. People would spend hours with certain plants, meditating and praying for communication. Once communication was established with the plant there

was knowledge of the plant's uses, which then served to heal the community. Buhner further explains that though the plant has the capacity to heal the body of a person, it is the medicine person that initiates and asks for the healing. This is important because it informs us that planting the medicines is simply not enough; there is a spiritual component to the healing one receives from plant medicine that involves work and practice (Buhner 2001). Buhner indeed proclaims, "A solution to the poverty and illness in our world lies within the ancient capacity for individuals to travel in sacred territory, to re-connect with the sacredness of the Earth, and to develop their own capacity, a birthright of being human, to evoke the holy and once again sit in the counsel of all life." (2001, 5).

Research has found that nature programs in specific provided a person with opportunities to be "fascinated," which acts to restore the cognitive functioning lost after a traumatic event. More specifically, horticultural therapies improve "motivation, communication, grief processing, depressive thoughts, anxiety, sleep, psychological well-being" (Selhub and Logan 2012, 154). Are the terms "fascinated" (used by the scientists in *Your Brain on Nature*) and "sacred" (used by Kimmerer in *Braiding Sweetgrass*) being used to describe the same phenomenon? Robin Kimmerer (2013) is uniquely positioned to speak to this with a doctorate in Botany and her Potawatomi Indigenous heritage. Her perspective encompasses both scientific and traditional ways of knowing, but it is clear through her stories that traditional knowledge sits closest to her heart and shapes her relationship to science, plants and the healing earth. Land is everything to her people, she explains, "identity, the connection to our ancestors, the home of our non-human kinfolk, our pharmacy, our library, the source of all that sustained us." (2013, 17). She goes on:

“Gardens are simultaneously a material and a spiritual undertaking” (2013, 123).

Stephen Buhner (2006) poetically connects Indigenous earth-centered spirituality to community and individual wellness. He writes about the history behind medicinal plants and their uses in Indigenous communities. He explains that our relationship to the earth can be spiritual and healing. In Buhner’s own words,

“To Earth-centered peoples the sacred is immediate. It is present in all parts of the world and one may, simply be willing to be in relationship with the deeper aspects of a part of the earth, attain closer relationship with Spirit. Through this closer relationship can come knowledge that gives guidance and meaning to one’s life and community. Through this deeper relationship over time one can gain power to evoke the sacred through ceremony, to shape its course into human affairs to benefit the community, to heal and instruct, to uplift. “ (1996, 9)

There is an emerging trend in urban Western contexts to integrate traditional healing with other forms of western medicine (ie. medication, talk-therapy, etc). Roy Moodley et. al. (2008) caution us, however, that traditional healing is not yet acknowledged or funded by Western medicine so currently it’s practiced by the wealthier. They attribute the Western interest in traditional healing modalities to the holistic approach and the awareness of connection between illness and the environment. Natural and spiritual approaches attempt to “restore harmony and balance” (2008, 154) within a person through mind, body and spirit. Traditional healing practices have evolved and taken shape over hundreds of years of struggle by Indigenous and Black communities in the face of colonization and slavery (2008, 155). I question whether the bourgeoisie who have come to adopt traditional therapies and healing have any awareness or respect

for this history. Similarly, within the educational institutions, the “back-to-nature” movement tends to also skip over any race, class or power analysis in their attempt to mobilize around our current environmental and health crisis.

Leanne Simpson (2004) makes the connection between the environmental movement and the appropriation of traditional Indigenous Knowledge as a means to make environmental reparation for the past 200 years of assault on the land. The problem with this scenario is that ecologists are overlooking the causes of environmental and social devastation in these colonizing times (past and present). Simpson cautions us that, “unless academics, researchers, institutions, and Indigenous nations are prepared to name the forces that have threatened Indigenous Knowledge and threatened Indigenous Knowledge holders and challenge the colonizing forces currently within the academy, our attempts to use Indigenous Knowledge as a tool for decolonization will certainly fail.” (2004, 378). In essence, what I think Simpson means here is that you cannot ethically cherry pick ideas, beliefs, knowledge and methods from other’s culture without respecting the entirety of the people, their history and their holistic belief systems. The recent trend from environmentalists to extract Indigenous Knowledge is self-serving, ignorant and further colonizing. The colonizer’s tools used to colonize Indigenous peoples in this country sought out to abolish Indigenous knowledge, language and people through the commodification of their land. In Simpson’s own words, “The land is humiliated, and since Indigenous Peoples and our knowledge is part of the land, we all suffer.” (2004, 379).

The healing I refer to in my project seeks to identify ways to survive during these volatile/neoliberal times. I do not propose solutions or fixes to the last 200 years of violence, struggle, destruction and genocide. Earth-based healing attempts to restore wellbeing in communities while still advocating for social change and justice. My earth-based healing approaches are not in line with Western self-help, individualized therapy approaches, instead a community approach to repairing our own trust and safety in the world. Nature, gardens, earth and plants are a starting point to building relationships outside of colonizing institutions. I have included eco-psychology literature both as a starting point and as a site of contention. While psychological healing is important, psychology's place in institutions (corrections, mental health, hospitals, etc) is often colonizing and has led me to examine the embedded power structures that support systemic racism, biopolitics and colonizing community development projects. Earth-based healing is a response to institutionalized forms of violence committed in the name of healing. Twenty years of having an oppressive class structure embedded in my body has had me seeking out answers to questions born from my experiences in institutionalized healing programs and Western medicine systems. Gardens are my second Emergency Room and I believe others have found this to be the same.

Personal Essay Knowledge made through journey

Today

Today is the day the Canadian government releases the Truth and Reconciliation Residential School Report, a day I have been anticipating for some time. Today is also part 2 of my psychiatric assessment at the Women's College Hospital, a day I have been fretting since part 1. Following my appointment, I will drive 6 hours north to Manitoulin Island for some quiet reflecting, solo journeying and for an adventure in "self care." I will rest from the string of medical appointments, tests and medical imaging that has consumed the better part of the last 3 months of my life. I want to illuminate the things inside me that don't show up on an MRI or ECG to get in touch with what healing means and where it can be found for me.

While waiting for my psychiatrist, I close my eyes and try to feel the space around me. Heavy latching steel doors slam, elevator beeps, dampened telephone rings. CODE BLUE alerts gain volume and momentum in a recorded loop. *CODE BLUE, CODE BLUE, CODE BLUE*. My mind drifts and I imagine someone who is desperate to be by ocean blue. I want to call out CODE GREEN for all those who haven't walked in the woods for longer than they can remember. *Give 1 cc of cedar oil and walk them through the back woods. IMMEDIATELY.*

I'm woken up by Doctor Phixit¹, "Pavey, I can see you now." She guides me down this long, narrow, winding hallway to her barren office in the back corner of the building. I sit, get comfortable, and take a few warrior breaths to sooth my anxious system. She constructs a few questions to check in about our last session to ensure I was

¹ A name I have made up as a means to protect the identity of my attending psychiatrist.

still comfortable with what I had shared. She congratulates me for surviving all the events of my life “so well” and proceeds to offer 5 treatment programs along with medications to address what she thinks is still lingering in my psyche: SSRI (anti-depressant) + Woman’s Trauma group + Narrative Therapy Group + Art Therapy Group + CBT Individual Therapy = Total Healing and Optimal Health. If my math serves me right, that leaves a mere single day a week after these appointments to live in the outside world. One day free of the institution. Can she be serious, I ask myself? This is not how I imagine my own healing. This is not how I’ve been surviving my traumas “so well.”

The back-story on this psych referral is that I thought my GP was sending me to a pain specialist to assess and prioritize my neurological diagnosis, which I was told requires surgery. You can imagine my surprise when I discover that the referral was for psychiatry to treat chronically ill people. I was hoping to address the underlying disease, not the disease’s impact on my mental health. I don’t need anti-depressants I need surgery. I couldn’t help but wonder if there was something in my presentation—perhaps visible traces of my working class upbringing, my queerness, or my history with drug abuse, that was impacting my ability to get treatment for my disease. Would someone with my condition living in Rosedale be getting this same referral to psych?

I accept the 6 new mental health referrals from Dr. Phixit because I had no fight left in me. I do, however, express my lack of confidence in pathologizing programs that place blame and responsibility on the participant without a single consideration for the systems that have landed them in these programs; but my voice is quiet and is quickly dismissed. To wrap things up, Dr. Phixit informs me that since I wasn’t considering medication at this time, she would not be able to continue seeing me. Pressured to defend

my position on pharmaceutical interventions, I offer,

“Well, I’m already dependent on pharmaceutical injections to walk, so maybe I better find other ways to keep myself grinning.”

“I understand, Pavey. It must be difficult,” she replies.

“Yes, you know, I have friends who’ve really struggled with the journey to finding the ‘right’ medication and I have seen some alarming dependencies, confusions and contradictions around those pills. It’s a journey I am not up for at this time.”

Dr. Phixit acknowledges that finding the correct medications can be a journey and that they are currently doing studies to genetically determine the most appropriate SSRI for a person’s individual make-up; this made the hairs on my arm stand up. I call this ‘medication nation’—soothe the injustices of the world one individual at the time with the perfect genetically matched concoction. Satisfy the rich and properly medicate the poor.

With this meeting out of the way, I move on, excited to start my journey into the lakes and forests of Manitoulin Island where I believe a different kind of healing is possible. As I wind my way through the inner city of Toronto, my heart becomes heavy with the news coverage of the Truth and Reconciliation Residential School Report. Tears stream down my face as the story of one survivor was narrated. The details of his terror went into my muscles and skipped my brain altogether. I can’t recall the details of the story today but the chills remain in the threads of my thighs. Indigenous people in Canada have experienced unfathomable amounts of mass abuse, terrorism and torture since the first point of European invasion, right up until the present day. I wonder how many times this particular survivor on the radio has sat in pathologizing western institutions not

dissimilar from the one I just left, and been advised to take medications or attend programs for his trauma. Or maybe he was one of the many who didn't make it into those "healing" institutions and is among the hundreds of people I connect with a year in my work at a downtown Toronto homeless program. Where does healing begin for people who've been so let down and wronged by institutions and systems? It's important to expose the atrocities if it's on the track to reparation. But for this individual whose story I hear on the radio, how will broadcasting his trauma change his situation or offer him new options for healing? In a time when governments are slashing funding, Truth and Reconciliation may as well read as "Cost-Free Callout, Now Shut Up" Working Group. I continue driving, thinking, listening and processing. The news story repeats every hour and I listen to the same words with increasing volume each time. The radio blares as I enter the streets of small town northern Ontario, I hope that, at the very least, other Canadians are hearing the dirty truths that were kept secret for so long.

I remember back to the first time I learned about residential schools. Sadly, it wasn't until my 20's, while in a course called 'Indigenous Context' at an addictions counseling program in Vancouver. My now mentor, and then professor, Emily Henry, had gathered us around in a group. She began by saying "class will be going a little differently for us today. Some students will be asked to leave, and this is why." Emily began reading out residential school statistics and pointing to random classmates, announcing who they represented in an imaginative Indigenous community. Some were asked to leave, some were taken to prison and others lost life from the horrific violence and disease in residential schools. By the end of her presentation, there were only a couple of students remaining. It was quiet and I think we all felt a pit in our stomachs.

This is what it looks like to blow up a community, wipe ‘em out, gone. Thorns of anger, rage, betrayal, helplessness, and furry echoed the room.

Emily brought the others back into the room, shared more of the atrocious statistics around residential school crimes and had us reflect on what we were feeling. I felt cheated that I had never been told the truth about this history. I never knew that for 100 years the government took Indigenous children away from their parents. No one told me that many of these children experienced abuse, racism and cultural displacement (Benson 2015). When I learned that the last residential school was closed in 1996 in Saskatchewan I no longer felt proud to be Canadian. Everything changed for me that day. I mean everything.

After some hours of driving, the landscape begins to change. The forests thicken with aromatic pines, cedars, fir and spruce trees. My breath deepens and I open the window for more air. Rock formations that divide the roadways appear. People have climbed the cliffs and built Inuksuks out of limestone for hundreds of miles along the highway approaching Sudbury. My father travelled these roads for almost 40 years on his way to work in Sudbury. Did he ever notice these Inuksuks, I wonder? He was more connected to these highways than he was to us, I think. My parents had divorced when I was small and my father spent the majority of his life working very hard mastering the trade of well drilling in rural northern Ontario. His untreated alcohol addiction, chronic

pain, and cancer eventually claimed his life at the age of 57². As I drive alone through these roads, I wonder if I was generationally cursed by the Paveys because I too battle with these afflictions, as does my brother. Nursing my father with my brother till he died awakened my own ghosts from trauma and addiction. My fragile mortality became palpable leaving me wondering how anyone heals from wounds inherited at birth.

Generational trauma and healing has opened me up to thinking more deeply about what it means to wear the injuries of another person. Cognizant of how the wounds of my father's difficult life has left a mark on mine, I am that much more attuned to how the magnitude of group trauma such as genocide, colonization and residential schooling, produces complex intergenerational wounds which, according to Indigenous teachings, takes 7 generations to heal. While there is part of me that wants easy fixes for all, the reality is that trauma takes up space at a cellular level in our bodies (Myss 1996). Its



I made this shrine from the remains of my father's life. It explores the relationship between emotional memory, belonging and anonymity. Comprised mostly of my father's belongings who died prematurely of alcohol related illnesses, this installation attempts to make sense of the grey matter that surrounds my family history and working class community.

mysterious complexity may only be reached by turning to spiritually-centered healing approaches that are more equipped to heal invisible ghostly wounds. In Avery Gordon's *Ghostly matters: Haunting and the sociological imagination*, she writes: "haunting is a very particular way of knowing what has happened or is happening. Being haunted draws us affectively, sometimes against our will and always a bit magically, into the structure of feeling of a reality we come to experience, not as cold knowledge, but as a transformative recognition." (Gordon 1997,8). It is this type of embodied healing that I call 'holistic' in that it reaches those dark, unlit places where generational trauma resides. The ghosts that were trapped in my father's body are also trapped in my own muscles and bones.

Marianne Hirsch's concept of postmemory describes the transgenerational affective experiences of those who have not directly experienced a traumatic event but still suffer from its legacies. The "transmission of traumatic knowledge and experience" (Hirsch 2008, 106) on the second generation, explains Hirsch, occurs in the close proximity of the family space. Hirsch extends her theory to think about how the expressive arts produced by this generation can be understood as their desire to repair trauma.

Stiff with dis-ease, I also reach to creative ways of knowing and understanding for insight into my own challenges. The gift of being sick is that it has made me open to the wounds of others and to what it means to heal as a community.

The sun is brushing the horizon now, casting pink rockets through the layers of clouds in the sky. The traffic slows to allow for sunset gazing and headlight adjustments. It's a new day for me, starting now. The road leads into a long queue for the single lane iron swing bridge; I realize I'm less than an hour away from Providence Bay where my 1

bedroom apartment awaits me. The drive over the bridge feels as though I am entering a new territory, separated by a flowing stream, which would become known to me as “Little Current.” Everything slows down some in this small town: 4-way stops, wide crosswalks and green spaces that overtake the highways and cement. I was beginning to feel more at home and decided to tune into the local Moose Radio. The mixture of country and classic rock jams are a nice soundtrack to the rock cliffs, towering coniferous trees and swallows of the great lakes meeting. What a landmass full of wonder, I think. Along the route to Providence Bay, I pass through three reservations. Very clear geographical boundaries mark this territory. The small white churches die off, single stores serve the mass community and colourful structures and artifacts litter the landscape. The space begins to feel integrated and connected, less fragmented and re-constructed to endorse “privacy.” There is openness and kindness to the place. Perhaps what I am sensing is the state of how we could be relating to nature, our surroundings or to our community. Or perhaps, I am being naïve and romantic.

When looking at nature and our relationship to it, it is important to note that “nature” is not static and has historically taken on different shapes, forms and meanings to past generations. Alexander Wilson (1991) deconstructs the ways in which capitalism, namely, the means of production and the flows of consumption, have dramatically shaped the north Atlantic landscape (124). Walking us through the last 200 years of colonization, modernization, industrialization, urbanization and suburbanization, Wilson demonstrates not only how our relationship to landscapes has changed, but also how the landscapes themselves have changed. Modernization, Wilson asserts, has converted the land-scape into a commodity through the eradication of Indigenous people. Ecotourism and modern

landscaping grew out of urbanization, where populations were increasingly separated from contact with nature. Wilson explains how inventions like paid holidays for workers, automobiles, interstate highways, the camera and the film industry have vastly impacted how we relate to nature, capture/reproduce it and how humans dominate living things. For instance, eco-tourism was a direct result of paid vacation fought hard for by the labour movement. Roadways and highways were built to support the new tourist industry. Humans were now manufacturing delicately curated landscapes and representations of nature for tourist consumption. Roadways themselves, Wilson stresses, fragment the land, divide communities and sever the existing landscapes. Somewhere between roadways and capitalism, our landscapes are the products of our human (sometimes destructive) creations. Modern land is dominated, partitioned and severed by highways; property lines and state borders that are policed and enforced. Essentially what Wilson is describing is that up until the point I hit the reservation, I was on a guided tour generously provided to me by Tourism Ontario. Every sign, advertisement and truck stop was strategic in generating income, power and authority to governments.

It seems that on these reservations the marks of suburbanization and capitalism have not overtaken the landscape in the same way. While not pure from capitalist influences, what remains is a more organic state of co-existence with neighbours: trees, lakes and people alike. What I see here is not what Wilson describes in his evaluation of the era of suburbanization in North America post World War 2. At that time, land was stripped, leveled and cleared to make space for densely populated homes. Gardens were accessories and possessions where people grew California perennials in New York along with non-native grasses. Wilson's example helps us understand the context of how nature

can become aestheticized: built and controlled by humans, reinforcing of course that humans are at the top of the natural hierarchy. The outcome is that over time we have progressively separated ourselves from the land in ways that communicate that having a relationship to natural environments are irrelevant to our health. Colonialism has and continues to have a profound impact on our relationship to nature. Colonial modernity is implicated in dominating nature, capitalizing on natural resources and diminishing the existence of Indigenous peoples. I'm reminded of this political and social structure every reservation border I cross and feel the colonial imprints on the roads through which I travel.

The address to my cottage comes up on the GPS. I make a quick left and I'm here. I am surprised to see that my accommodation is a single shared house and not a self-contained cottage. I'm greeted by a slight, white-haired German man who shows me around and gave me a key. Something about the place feels eerie and disjointed. However nice, hospitable and professional the owner is attempting to be, I still feel uneasy about being here. Maybe it is the scattered floor to ceiling mirrors throughout the place, or the custom bookshelves housing German to English dictionaries and 'Learn Native Cultures' texts. The dollar store dream catcher is not missed either. It's late and I'm stiff from the drive, so I decide to retire early to the king size bed in the back room of the basement. Just as I was settling, the man appears in the apartment. Unbeknownst to me, one of the glass mirrors was a secret door to my unit. Startled, I ask if he wouldn't mind knocking louder next time. He questions when I will be up in the morning so that he can serve me a light breakfast. I reply, "early, very early. Umm. 8 am okay?" He agrees, scampers off and I am left wondering if he'll make another surprise appearance. Tiredness overtakes

my panicked thoughts and I lull myself to sleep.

Up at the crack of dawn, I have time to shower and take my Chinese herbs before the breakfast arrives. Two minutes after 8 he appears with enough food to feed a family. 2 croissants, 2 slices of brown toast, yogurt, berries, milk and oats with raisins. I didn't eat this much for breakfast last week even, let alone all in one sitting. I ate only a small portion and decide to hit the road. While on the road, I notice that the daylight uncovered the overwhelming number of small white churches scattered about the landscape. In some parts of town, there is a small church every 5th house. Biblical scripture, pro-life campaigns and anti-sexual assault billboards litter the roadways. I thought I would feel better after leaving the "cottage" but I remain unnerved as I drive the Manitoulin landscape. I hit another reserve and I'm relieved to see the signage transform into more appealing topics announcing art, museums and tobacco products.

I had previously scheduled a medicine walk with a tourist organization on the M'Chigeeng reservation for today so I slowly make my way there. A little early, I am greeted by my devout tour guide, Shawn. A warm, firm handshake opens our journey into the backyard to a magical medicine patch. To be honest, I imagined the medicine walk involving more walking in the woods, but I settle in and am pleased to have a private tour of the grounds with Shawn. He begins by sharing his knowledge of the 4 sacred medicines: Sage, cedar, sweetgrass and tobacco. Shawn prepares a smudge and invites me to join in the cleansing ceremony. I accept his offer and share how the medicines were introduced into my life 9 years earlier in my work with Indigenous youth in recovery. Shawn gets quiet, puts his hands out and thanks me for doing this work. I feel embarrassed and insist that I am so blessed to be a part of the community, and share how

much I spiritually gain from all the teachings I have heard over the years. We have a quiet, special moment before sharing the smudge.

Shawn shows me around the gardens; strawberry leaves are a diuretic, he explains, and Rhubarb a laxative. Yarrow breaks a fever and packs a wound, lavender calms anxious nerves and aids in sleep and then there's viola. Viola is a detoxifying agent that aids in arthritis, skin problems and whooping cough. These conditions, I think, sound like immune deficiencies. Could sweet viola be my medicine, I wonder? I have lived with an auto-immune disease that attacks the tissues in my spine for over 18 years now. Hearing about Viola's medicine sends flutters to my stomach. I must get to know this Viola.

My medicine walk nears its end when Shawn motions that he'll be back soon. A few moments later he returns with bannock, cedar tea and berry preserves. We sat together and shared the bread and tea under a shade tree. Our conversations leads to Shawn recommending that I venture over to Bridal Veil Falls up the road for an earthly adventure to reflect on where I am at and the beauty that surrounds me. I firmed up a hiking plan with Shawn to the Cup and Saucer trail for later this week when the rocks dry out. Shawn knows I may require a little extra help physically with parts of the hike but he's up for the adventure.

My time at Bridal Veil Falls is tranquil and inspiring. After filming the falls for a few minutes, I follow along a trail that hugs the river. The sound from the fast flowing water saturates my senses. Beside me, I notice a slow moving turtle walking along the trail. Our eyes meet, and we return back to the walking path. We continue along the path together for some time before the turtle stopped to sunbathe. Eager to capture our

conversation, I reach for my mobile phone and begin to film. The film cannot capture what I see, but lucky for me, the moment is burned into my memory. And just like the river, I keep moving on.

Most of this trip, I spend exploring the island in my car, looking for viewpoints, animal interactions and traces of the earth's healing capabilities. Part of me, I know, is avoiding spending time at the B&B while another part of me is attached to the freedoms that driving provides. Where I grew up in the small town of Strathroy in South West Ontario, public transit did not exist; so securing your driver's license at the age of 16 meant a literal freedom of having mobility around town. Eventually, the taste of freedom compelled me to move away altogether to places where I could express more comfortably my queerness. The freedoms that my first '1996 Suzuki Swift' provided me are still serving me today at 33 years old as I dodge the uncomfortable restraints of this small town through the safety of my auto-mobile. For several years after my father passed away, the only place I could cry was in my car, while tuned in to a country radio station. Perhaps my connection to my car is one of the few things I have in common with my family, who treat their cars as their prized possessions. You could say that my relationship to my car is my heart-string to home, I suppose.

I take random roads off the highway in search of an adventure. McLean's Road takes me up the escarpment to a grassy cow meadow/wind field. I find it odd that the most breathtaking view I have seen thus far is home to 13 Heifers and 10 wind turbines.

There was a quality to the light on this ridge that mystifies the land even more for me. What was here before the cows and wind power? What did it look like before? Has it always been hazy and mysterious up here?

It's time to return to my B&B, prepare some dinner and get some rest. On my drive back I can't resist stopping at this picnic rest stop off the highway. The weeping willow trees line the lake just feet from the highway. There are no stores here, just a few tables and a washroom. The simplicity of this rest area creates a kind of silence around me. No cell phone plug-ins, fast-food chains or busy fueling stations. This place, I learn later from Shawn, is sacred territory to him and his ancestors, a place where the great lakes meet. His people never lived on the Island before contact. Manitoulin was only a place where people came to gather medicines, rest, partake in ceremony and even work through conflict. It wasn't until European threatened the loss of their land that people moved to protect what they could. I think back to all the small white churches, Christian highway signs and the B&B vacation retreat lodgings on this land and how they might be the markers of violence, dominance and colonizing histories. I take in a few more breaths of fresh lake air before piling back into the car and driving 20 minutes away to my B&B. I fix myself a simple dinner and retire to my bed early. My mind idles and my heart grows heavy.

On my way out in the morning, my host catches me in a lengthy and rather uncomfortable conversation about the journey that led to him to live on Manitoulin Island. He offers that there's 3 types of people living on Manitoulin Island, "First is the originals, you know the Aboriginal peoples. Second there's the first wave Scottish settlers, you know, they have the names around here. And lastly there's the imports, like

me, who came here much later in the game.” The three separate groups pretty much keep to themselves, he explains. The only exception to this rule is when everyone meets in senior high school: “there’s only one of those schools for everyone,” he goes on. This conversation makes me think about how this story is lived on the land. How do these three groups manage to avoid contact with one another on such a small island? What type of learning happens at the high school in the midst of so much conflict? Are students taught the history of the land or will the conflicts haunt their generation as well? My host describes a time when he had a conflict with a local chief. He was transporting a large log for the building of his house and he failed to ask permission to use the road for this purpose so the community decided to close the road through their reservation. “It was the only damn road too,” he explains. My host is insistent that the roads here belong to the Canadian Government, not the Indigenous people. I rush out of this conversation, acknowledging that it could be unwise of me to interject and risk pissing off the person who’s putting me up. For the next 12 hours I feel rather dirty, dishonest and homesick for my bed. I spend the rest of the day driving to town, washing my car, and sitting by the water. It’s my last full day here and I really cannot wait for my nature hike tomorrow with Shawn.

The day has arrived when I can gather my things, hike with Shawn and mentally unpack my journey over a 6-hour drive home. I swing by and pick Shawn up at his office. We make our way to the trailhead a few minutes up the road. Shawn starts our hike with a smudge. We give thanks for the beautiful things that surround us, for knowledge and for relationships. I feel grateful to be on this journey. Shawn and I chat away while hopping rocks, climbing tree roots and dodging wet parts of the spring trail. Shawn takes

breaks to tell stories and offer teachings about nature healing and survival. He teaches me uses for sap, fungi, bark and moss. As it turns out, Shawn believes too that every aspect of the forest can feed, medicate and cure a lonely spirit. We bond over the magnitude of how the healing capacity of nature has individually impacted us on our journey. I am inspired by Shawn's honesty, tenderness and pride. His son is lucky to have such a role model in his life, and his community too for the important work he does to keep his culture alive, I think to myself. It felt like no time at all when Shawn turned a corner and said, "This is the moment I've been waiting for... Welcome to my office, Pavey!" Shawn excitedly shouts. He drops his knapsack and skips over to the outer edge of the cliff side. He shares a story about how his ancestors believe the cliff was formed. I won't repeat the story because I could mark its beauty and miss something important. Within seconds, a red-tailed hawk flies over. Shawn pauses, greets the hawk in Ojibway and offers up his spirit name. This way, Shawn tells me, the hawk can know who he is and who his relatives are. Furthermore, the hawk may have a message for us from our relatives. We watch the hawk together while she danced circles in the sky. We offer tobacco to the Creator, along with a prayer.

Shawn shares some food and tea with me while we finish our visit at his "office." This is the highpoint of my time on Manitoulin Island, the most calm I've felt since arriving. The calm is quickly swept by panic when I receive a phone call from my boss at work. To my surprise, the circles that hawk was flying around in, included radio-frequency energy that allowed my cellphone to receive a signal. Gloomier, was the news my supervisor provides me. A client of mine had taken sick and was given just 24 hours to live. She is really special to me and I knew she was suffering for a long time. I am

confused about how to feel. She is barely 50 years old. Imprinted by the 60's scoop, her life was an endless struggle with colonial traumas, chronic illness, homelessness and addiction. Could that have been her dancing in the sky just a few minutes ago? I hold on to this thought, since it's the only bit of hope I have.

The walk back down was rather treacherous given that the spring thaw made the limestone and tree root paths wet and slick. Still in shock from the news, I don't feel much. My feet and legs navigate the way down without much guidance from my mind. My mind hangs on Shawn's earlier notion that maybe the hawk had a message for us. Could it be that my dear friend and community member is not suffering any longer? Please, let her be dancing in her body again, I think to myself.

When our hike concludes, Shawn and I say, "See you soon!" My long, meditative drive home begins and I use the time to connect to the hawk, to my work and to my own place in the world.

Tomorrow

Deb dies.

Wellness Talks

I choose to focus my workshop on “wellness,” a topic that sits close to my heart. Having struggled with health for most of my adult life, I have been bombarded with the recurrent challenge of navigating my disease and pain in an ablest society. This has translated into people perpetually telling me what I could or should be doing to get healthier. In a social context where there tends to be a focus on “the cure” (something I was admittedly also beholden to for a long time), I came to yearn for a group that made it okay to be sick. I reached a point in my illness where I simply wanted to learn more about how to live with my disability. I certainly knew that I also needed to learn how to talk about my health in a way that didn’t invite others’ opinions, advice or case planning of my life. Most useful to me has been finding people with whom I can discuss the social construction of disease and disability with. It is among various communities that I have found genuine support, compassion and friendship. My goal here to create a workshop that would make possible this quality of support to a group of individuals who are struggling with homelessness and health related issues. I am imagining that the participants are already part of a housing program and therefore have an existing relationship with the workshop leader and have built trust with other group members as well.

The workshop themes I will follow are relevant to my own experiences and are not universal to all who struggle with the meanings of “health” and “wellbeing.” It is for this reason that I have structured workshops with activities that make space for open-ended discussions where participants can freely express themselves without agendas that might control the outcome and fluidity of conversations. It is important to validate what

is most important to them and what feels most pressing. For instance, rather than prompting them to talk about “discrimination,” for instance, my goal is to allow them to talk about their lives the way they experience it without prescribing language and analysis. Avoiding strict agendas allows for conversation to be organic, migrating to unanticipated places where creative meanings of “wellness” can emerge. Collective dreaming is essential in shaping belonging to a community. But collective visions shouldn’t overshadow or overwhelm individual and independent dreams and desires. The goal of this group is for people to define health on their own terms, through a structured setting, with no interest in state-identified targets or goals.

The Context

A longtime friend of mine shared a story once about his life and struggles leading up to 30 years of homelessness. He described a day when he was five or six years old and was caught using a swear word he had learned at a foster home earlier on in his life. The punishment he received from his new foster parents did not measure appropriate to the offense, in his words, “They were stricter with me because I was the Native kid.” When his foster parents decided that his punishment would be to pour an entire bottle of yellow dish detergent down his throat, he explained that it changed him forever. He describes this day as the day he became a “bad little boy.” My friend’s story about himself individualizes his experience of abuse. It unfortunately overlooks the systemic depth to how horrifically indigenous people have been treated in this country. If viewed through an Intersectional lens of his life, we might tell a different story. Born an aboriginal man into a life of historical and systemic injustices, my dear friend didn’t have much of a chance in life from the beginning.

Services were never offered to him in a culturally appropriate, anti-oppressive, decolonial way. My friend has been pathologized, psychiatrized, medicalized and dejected altogether from participating in “the good life.” Most social programs and community groups miss this perspective in their work. They focus on repairing the person instead of the systems that have injured and punished him. State-funded programs have no interest in attending to colonial traumas – residential school trauma, loss of language, general cultural genocide, and alienation from land. With Indigenous people disproportionately represented in institutions, why are we without a mainstream decolonial lens or approach to healing?

The current welfare system, with all its discriminating rules and modes of enforcement, is punitive, stigmatizing and fails to see people through the entirety of their situation, both historical and systemic. Unlivable finances, unaffordable housing, poor health benefits, disease and state surveillance are just a few of the challenges faced by “social worked” communities. Instead of being given enough money to survive, people on assistance are given a fraction of the money they need to survive along with a handful of workers to assist with the crises that comes with this scenario. A framework that considers the intersectionality of struggles that is less directed by hegemonic notions of “healing” could extend its reach to more marginalized individuals and groups. Intersectionality allows us to see people as whole, and through the entirety of their situation; it is, at its core, decolonial. Mainstream services fragment peoples’ experiences into parts, or sectors if you will; homelessness, food security, disability, mental illness, addiction, developmental disabilities, among many others. What this model is missing is the lens that acknowledges that as soon as a person experiences one of these oppressions,

it's likely they automatically fall into multiple of these said "sectors." Race and class are indicators of the oppressions you will acquire. None of this is discussed in service provision. It's simply not even taken up. What we see instead are courses and training for clients that promote "financial literacy" or "life skills training," as if these are the reasons someone is homeless or poor. In my work with homeless Torontonians, I've encountered their narratives of devastation, poverty, homelessness and illness; stories that speak to discrimination along the lines of race, class and gendered violence, even if that is not the discourse used by community members.

Intersectionality is described by Kimberle Crenshaw (1991) as the way in which multiple oppressions intersect to compound the marginalization of individuals, often making widely used interventions highly unsuccessful. She argues that systems of oppression divide their experience, fragment resources and often push them back into the very abusive situation they are wishing to flee. Because not-for-profit agencies are funded according to their mandate, people are funneled and filed into "specialized" systems intended to support them. There is little consideration made for people suffering from multiple occurring oppressions. Crenshaw, who was discussing battered women of colour in particular, argues that their experience is not entirely similar to that of a man of colour, nor is it the same as a white woman. In this light, uniquely delivered services are required in order to support their multiple-occurring oppressions. Crenshaw critiques the resources available to battered women and describes them as being inadequate to people experiencing the complexly entwined barriers made from gender, race and class differences since they fail to operate from an intersectional, cultural and feminist lens. Often times, women of colour are left without services appropriate to their experience. In

her words:

Where systems of race, gender, and class domination converge, as they do in the experiences of battered women of colour, intervention strategies based solely on the experiences of women who do not share the same class or race backgrounds will be of limited help to women who because of race and class face different obstacles. (Crenshaw 1991, 1246)

A Canadian study showed the multiple barriers Indigenous people experience while trying to access harm reduction treatment (Smye et al. 2001.) The study participants describe their experiences of discrimination and racism in various methadone maintenance programs, a harm reduction approach to taper off of opioid dependency. Smye et al. advocate for an intersectional lens in harm reduction treatment in order for people to succeed in acquiring anti-discriminative medical supports. In their study, they found that their participants felt shame, stigma and judgment when accessing healthcare. Harm reduction approaches, they argue, are not getting to the root causes of substance dependency: historical trauma, racism, poverty and violence. They described demoralizing urine testing from a program that in its structure is distrustful and infantilizing. This situation is exacerbated by required daily visits to the pharmacy (often, time-consuming and expensive to get to since only certain pharmacies dispense Methadone), an inability to travel for their daily dose, concerns around relocating and finding a doctor who will prescribe the drug, and lastly the desensitization of service providers.

Unless an intersectional lens can be applied in health, social and human services, stigma, racism, social and structural constructs will continue to chase people out of essential medical services and away from meaningful interventions and healing. Health providers need to adopt views beyond hegemonic norms of identity to grapple with deeper systemic histories that devastate marginalized people in Canada. Services need to reach people like Kenny, who have lost complete hope in the systems that further oppress, criminalize and harm him every day of his life.

My goal in creating a workshop is to take an intersectional approach in that I am aware of the multiple oppressions that have affected people's lives, but do it in a way that does not hijack their conversations with academic concepts. Instead, my goal is to provide space where individuals can creatively talk about their experiences and work through the injuries they have suffered.

“This is Not a Life Skills Course”

One could argue that wellness is an acquired skill, but what I want to suggest is that people who are homeless who might participate in a wellness group are already tremendously skilled because they would have needed to learn to be resilient; in fact, they are beating the odds by even surviving as a disabled, homeless individual in Toronto. Whether they see it or not, they have developed skills and as such there is much to be gained by sharing stories, experiences and dreams.

Broken bones, cracked knuckles and bruised faces: these are some of the more common physical ailments I come across in my work in the homeless sector. Unfortunately, these are the most healable of their injuries; the more difficult injuries are

their complex experiences of trauma, racism, disability, violence, dejection and poverty.

It has become apparent to me that folks without shelter struggle to receive the same level of health care that others receive in Canada. People are too often refused adequate care in emergency rooms, presented with barriers at mental health organizations and even barred from hospitals and left with no treatment options. When I think of service providers that actually assist in the radical ways necessary to connect transient folks to essential services, the options are limited and not exactly hopeful.

The goal of this “This is Not a Life Skills Course” is to consider interpersonal levels of support and ways that the community can self-organize to speak out about their injustices. Part of the workshop will focus on the ways people have created health in their lives despite the challenges around access points and the limited number of services that exist. I will broach the topic of community and open up dialogue with participants around whether they feel “community” is even relevant or impactful to one’s health.

My workshop aims to build community peer support, a model that can sustain itself outside of the institution. There are no skills this workshop will offer anyone that they don’t already have. It’s an ethical space to talk and think about wellness together.

Day 1: Wellness

Time	Objective/Method	Description of Process
10:45	Set-up & arrivals Snacks & tea	<ul style="list-style-type: none"> • Arrange chairs in a circle • Offer a variety of seating options in make the space more accessible for people. • Put out healthy snacks and tea. • Check in with participants as they arrive to see if they require any additional supports while at the workshop today. Let people know they are welcome to get up, walk around, leave the room, or whatever they need to feel comfortable.
11:00		<ul style="list-style-type: none"> • Introduction - a bit about me and what connections I have to “wellness” • Do a go-around of names. • Speak to the sensitive nature of these group discussions and ask people to respect confidentiality. • Talk about the title of the workshop “This is Not a Life Skills Course” and bring it back to the group for their thoughts and experiences of life skills programs. • Invite their thoughts on: “What does wellness mean to you? What does wellness look like?”
11:45	Break	
12:00		<ul style="list-style-type: none"> • “Are there barriers in your personal history that have kept you from wellness? Ie: a doctor, a program, a system or policy?” • “Where does community fit into wellness for

		<p>you?"</p> <ul style="list-style-type: none"> • “Where have you found community?”
12:45	Lunch	
2:00	Share Networks/ Collage	<ul style="list-style-type: none"> • Develop a list of healing spaces with participants. This could include parks, programs, people, pets, plants or anything really. Who shares in our sickness and wellness? • Create an artistic collage of these positive influences, which can be continually added to over time if the group develops and continues to meet. • Offer participants a copy of the collage to take home
3:00	Closing	<ul style="list-style-type: none"> • Wrap up the day by overviewing some of the conversations had. • Provide participants with feedback about the difficult paths and challenging terrain they are navigating in the healthcare system. • Appreciate the journey it may have been to even get to the group today. • Celebrate the new connections, conversations and possibilities that were sprouted today • Ask for input or suggestions into tomorrow’s lunch option.

Day 2: Stories

Time	Objective/Method	Description of Process
10:45	Set-up & arrivals Snacks & tea	<ul style="list-style-type: none"> • Arrange chairs in a circle. • Offer a variety of seating options in make the space more accessible for people. • Put out healthy snacks and tea. • Check in with participants as they arrive to see if they require any additional supports while at the workshop today. Let people know they are welcome to get up, walk around, leave the room, or whatever they need to feel comfortable.
11:00	Sharing through stories	<ul style="list-style-type: none"> • Remind participants about confidentiality around group discussions. • Talk about stories. “What are the value in stories? Do they heal? Can they harm?” • Open the circle up for conversation and reflections on: “How do bad and good stories stay with us and impact all our other stories and relationships?” “What story would our pain tell us about ourselves?”
11:45	Break	
12:00	Sharing through dreaming	<ul style="list-style-type: none"> • Introduce the topic of dreams and explain how dreams communicate unconscious knowledge. This is true of daydreams and night dreams. If we pay close attention to our dreams, we may find that they are trying to tell us something. • Ask participants to turn to their neighbour and

		<p>discuss your dreams. “What are your more conscious dreams?” Unpacking these dreams, may also help us access mysterious knowledge about ourselves and about our desires.</p> <ul style="list-style-type: none"> • Have participant’s report back to the group about their discussion and findings.
12:45	Lunch	
2:00	Creative mapping of experiences	<ul style="list-style-type: none"> • Present the activity: “Person, Place, Plant or story...” Instruct the group to turn to their neighbour to discuss a person, place, plant or story that has impacted their health and wellbeing positively. Explain what it is about that person, place, plant or story that added value and meaning to their lives. • Have the group come back together to share their discussion with the rest. Explain that people can share only what they are comfortable with sharing –and it’s even okay to “pass” on the sharing part. Maybe they feel more comfortable talking about how it felt to share with someone these personal aspects of themselves.
3:00	Closing Party	<ul style="list-style-type: none"> • Provide participants with feedback about the difficult paths and challenging terrain they are navigating in the healthcare system. Appreciate the journey it may have been to even get to the group today. • Celebrate the new connections, conversations and possibilities that were sprouted today

		<ul style="list-style-type: none">• Send around an email/phone/address list if people wish to meet up again in the future or keep in contact with one another. Let participants decide if we should continue meeting. If there is interest, set another date for a next session!• Wrap up the day by inviting group participants to a celebration with music and food. Have the event catered and invite live musicians for entertainment and dancing.
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Appendix 1

Creative Scrapbook



dreamscapes

this journal is a collection of creative images taken on a trip to Manitowish Island. Inspired by the idea of how learning is made through journey and contact with mysterious matter, these works give form to the knowledge found in the landscapes. Resisting the prevalence of fragmenting and dominating the landscape, these works are a result of an attempt to have a healing encounter with the earth. Here, art is a way of making knowledge, a method for deeper insights into the colonization of the land. This collection, in that it tells a story, reflects Indigenous ways of knowing and at the same time is a testament to the ways in which Indigenous knowledge is under threat.

by
-lp Pavey



"Stolen"



"Paper Thin"



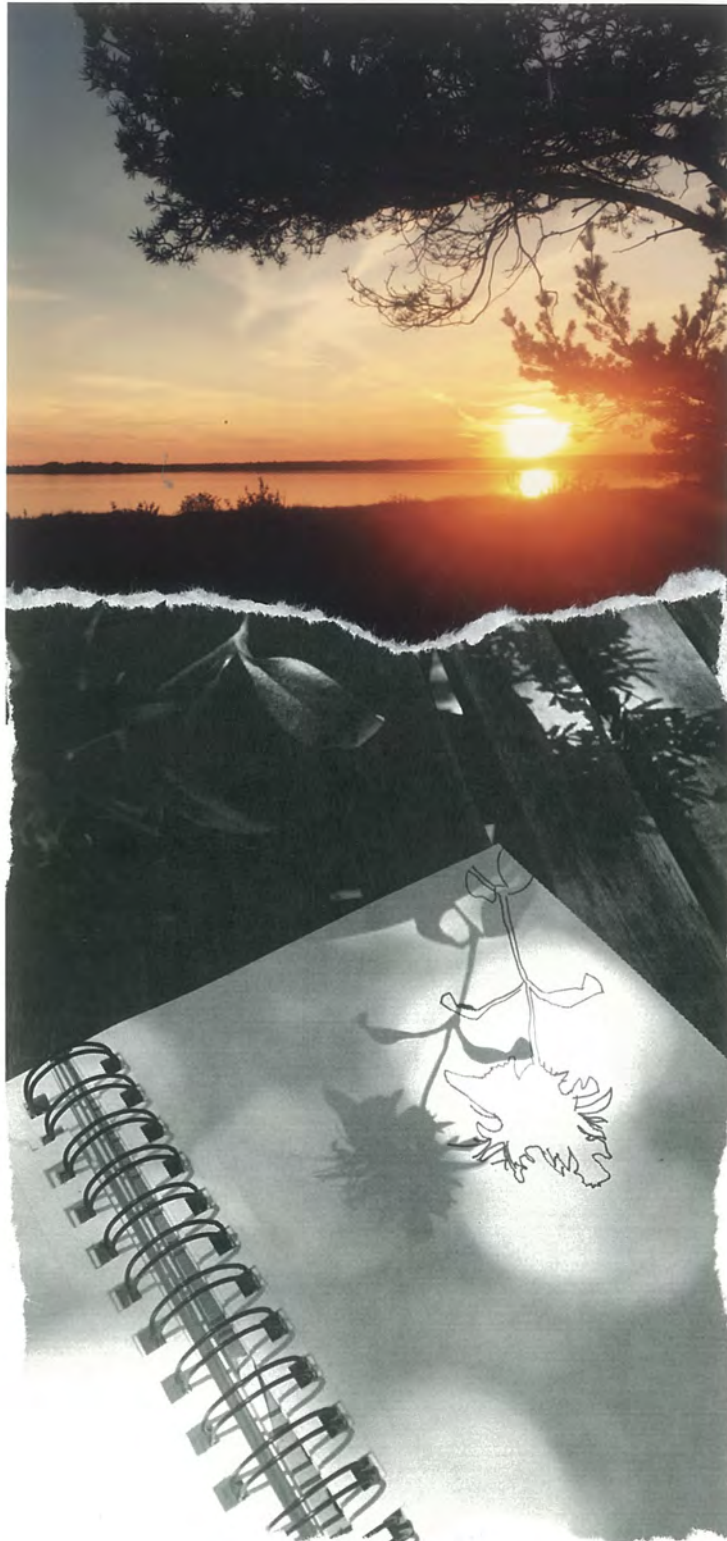
"Remains"



"Family Trees"



"Hairline Fractures"



"Conversations"



"Rock, Paper⁸⁷, Scissors"



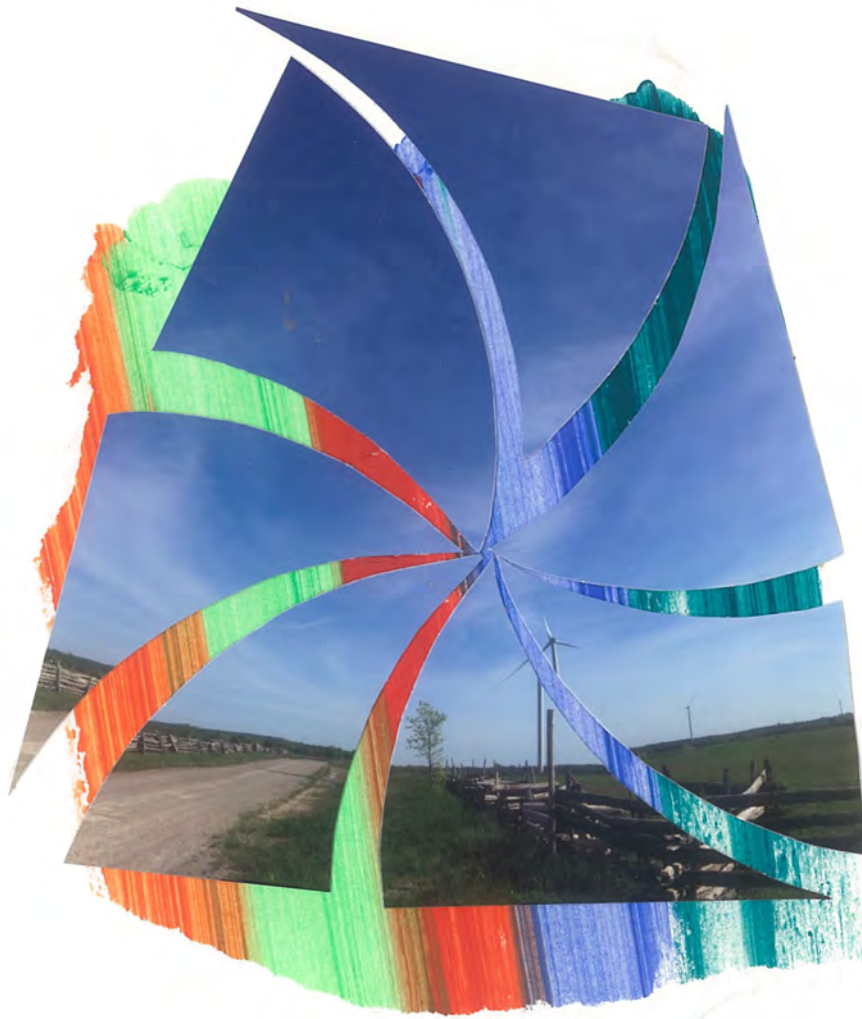
"Partitioned Landscapes"



"Colour Vision"



"S. 10."



"Energies"



"Green Spa"



Strawberries
Strawberry leaves have traditionally been used as a diuretic and to treat diarrhea as well as being gargled for sore throats.



Mint
Make a health tonic - place leaves in a jar and can use with honey and lemon.

Garlic
A proven antiseptic. Shown to have some affect on regulating blood pressure.



Viola
Use flowers, leaves and stems - make tea or put into salads. Assists with whooping cough, arthritis, skin irritations and is also a detoxifying agent.

Prickly
Use leaves and stems - make tea or put into salads. Assists with whooping cough, arthritis, skin irritations and is also a detoxifying agent.



Rhubarb
Stems and roots can take with vegetables and as a tea can act as laxative.



"Nature's Pharmacy"



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