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Inuit Clients and the Effective Helper:

An Investigation of Culturally Sensitive Counselling

Marja-Liisa Korhonen

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Submitted as a Requirement for the Degree of
Doctor of Philosophy

School of Education
Centre for Studies in Counselling
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March 2002

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ABSTRACT

There has been a general assumption that Western counselling may be inappropriate in a culture that not only still has many traditional aspects, but which also wishes to retain and regain positive traditional practices. There is, however, little specific information about either traditional helping methods or practice with contemporary Inuit. There is also no rigorous comparison of Western and Inuit helping. Training for competence, including helpful modern strategies, is seen as a need in Inuit reports and recommendations. This thesis therefore investigates and compares Inuit and Western theories and practice in order to identify strategies useful in practice with Inuit clients.

Using grounded theory as the methodology, Western counselling, multicultural counselling, and both traditional and contemporary Inuit views are analyzed. Modern Western counselling approaches and the seminal theorists are examined in order to identify strategies and values which inform effective practice. The rationale, development and strategies of the more recent multicultural counselling models are also investigated. Conventional and the multicultural strategies are compared.

Information about traditional Inuit life is gathered from recent interviews with a number of elders. Relevant aspects of traditional worldview and values, beliefs about human behaviour, problems and helping strategies are identified. Younger Inuit perceptions of helpful and unhelpful counselling are examined. Modern counselling values and practices are then compared to Inuit conceptions.

The study reveals a client-centred, integrative/eclectic model of effective generic Western counselling, rooted in the primary theorists, and based on core conditions of relationship. Multicultural counselling has no differences in values and strategies, but emphasizes development of counsellor awareness of possible cultural differences. Inuit conceptions, traditional and contemporary, are based on similar relationship qualities, the importance of individual choice, and understanding of client difference, individuality, and context. Cognitive-behavioural strategies were seen as most helpful, with communication and expression of feeling also viewed as crucial by the elders. Inuit and Western counselling values, process and strategies are thus compatible and indeed similar, and traditional strategies can be enhanced by modern knowledge.

As traditional Inuit culture is a non-Western aboriginal one, the results may have applicability to counselling with other cultural traditions.

Declaration

I declare that none of the material contained in this thesis has previously been submitted for a degree in this or any other university.

Statement of Copyright

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Dedicated to

my father Victor-Aulis,
who taught me to value dreams, passion, and reason
and my mother Aura,
grounded in practical reality,
who both died during the writing of this thesis.

I wish.

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I am beholden to many people, without whom this research study would not have been possible. My thanks first to the elders whose words, collected by the Inuit Studies students and advisors, inspired this study; and to Dr. Susan Sammons and Alexina Kublu, friends and colleagues, for providing me with the transcripts of the elders' interviews and ensuring their accuracy.

My deepest thanks also to my younger informants, who were generally willing to speak publicly but whom I chose to keep anonymous. You know who you are. Without your willingness to give your time and deeply thoughtful responses, this study would not have been complete.

Nanci Tagalik, your personal perspective was invaluable. Geela Giroux, may you rest in peace, Leena Evic, Monica Ittusardjuat, Nellie Kusugak, Sally Mikijuk, Peesee Pitsiulak, Aaju Peter, and Mary Wilman: your feedback about my analysis of Inuit traditional practices was crucial. I wish there were space to include your own stories.

My path has been influenced by many: Katharina Downs, who opened the gate in 1970; Maryann Brazier and Phil Lawrence, who introduced me to Rogers, Ivey, Carkhuff, Glasser, *et al*; and all the hundreds of students and friends from whom I have learned, in my years in the North – you know who you are.

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Chapter 1: Introduction

As an experienced researcher and examiner of the British Association for Counselling's Diploma for Counselling Psychology, John Rowan (1999) identifies five areas of weakness in current thesis writing: "The first weakness which struck me…was *the anonymity of the researchers* [italics his]. More often than not the reader was never told the age, colour, sex, previous experience or anything else about the researcher" (1999: 28). I shall therefore begin with some information about myself and how I came to be doing this research. (This thesis also intends to fulfil the other requirements he cites: adequate information about method; adequate sampling; a truly qualitative analysis; and a meaningful discussion.)

I have been a counsellor since 1970, having worked mostly with behaviourally and emotionally disturbed adolescents and their families, primarily from lower socio-economic levels, and with male welfare clients who were street alcoholics, prostitutes trying to leave the life, ex-psychiatric patients and men otherwise marginal. In 1988 I moved to the Eastern Arctic to teach counselling skills and theory to Inuit students. My work in southern Canada had taught me the importance of suspending judgments based on my own lifestyle, values and priorities. I was also aware of possible ethnic and cultural issues: I am bicultural and bilingual myself, born in Finland but raised in Canada by older parents whose conceptions of appropriate behaviour were based on traditional Finnish expectations, and who insisted I retain my language and pride in my roots. I learned early in life that there were differences in what was considered necessary or acceptable in my home or with other Finns, and behaviour in my Canadian world, and I learned to move easily between the two. I have been in a cross-cultural interracial marriage for more than thirty years, and my large extended family of relatives includes, among others, Finns in Finland, Jamaicans, African-

Americans, British and Nigerian members, in different socioeconomic and educational contexts. I thus move between many worlds. (I use the term 'possible ethnic and cultural issues' deliberately, for it has struck me as interesting that my Jamaican-born and -raised husband's worldview, values, priorities, and interests are similar to mine, whereas my twin brother's are significantly different in several respects.) In my move to an Inuit society that had been pulled into modern life very recently, I was therefore conscious of the need for cultural sensitivity and prepared to adjust my counselling and my teaching of counselling in ways that would fit with an Inuit society struggling to achieve a prideful balance of old and new.

It turned out, however, to be difficult to *know* what to do. Although there is a fair body of literature on aboriginal (primarily Indian) counselling, much ethnographic information about Inuit, and much emphasis on the need to learn from traditional ways, there was virtually nothing specific about Inuit helping methods. So: I decided to do my own research.

Culture, Counselling, and Inuit: An Overview

Johann Gottfried Herder (1744-1803), German theologian, writer and earliest significant proponent of the concept of cultural heritage as the force that binds groups of humans together, and of the theory that each culture is 'right', stated that,

> The picture of nations has infinite shades, changing with place and time. But as with all pictures, everything depends on the point of view or perspective from which we examine it. If we take the idea of European culture for our standard we shall, indeed, only find it applicable to Europe (1969: 313).

He had insight also into the political relationship between cultural identity and domination:

> The more a group is threatened, the more it will turn in upon itself and the closer will be the ties to its members. To avert dispersion they will do everything to strengthen their tribal roots (*ibid.*: 173).

What Herder spoke of two hundred years ago has become an emotion-laden social and political reality in the postmodern age. Today, as a response both to discrimination and oppression and to the perceived threat of a globalized capitalistic Western culture, recognition of cultural differences and identity (which has expanded to include not just race and ethnicity but all groups which are judged oppressed), and belief in the relativity of truth and reality are insistent principles of political and social thought, certainly among many in the West. Current thinking about cultural sensitivity derives from three theoretical bases:

- postmodernist thought, with its beliefs that meaning, truth and reality are unknowable and rationality an illusion;
- anthropological theories of cultural relativism with its beliefs that truth and reality are socially constructed and all versions therefore equally valid, and cultural determinism with its emphases on human malleability and culture as the determinant of the human condition; and
- critical theory with its belief that societies evolve through stages of oppression and repression and the work of society's members is to break down those forces in order to achieve an ideal world.

From this combination of contradictory ideas has evolved a controversial Western sociopolitical viewpoint that focuses on differences, especially differences from mainstream Western thought and beliefs, which are often seen as oppressive and invalid (Tomlinson, 1997; Taylor, 1994; Griswold, 1994; Habermas, 1994; Marshall, 1998; Friedman, 1994; Larrain, 1994; Sahlins, 1995; Obeyesekere, 1990; Eriksen, 1993; Hammersley, 1995; Craib, 1992; Bernstein, 1979).

Out of these notions of oppression and cultural relativism/determinism has grown the belief that counselling reflects Western values and norms, and that in

order to be respectful of and effective with other cultural and ethnic groups, counsellors must use culturally appropriate strategies (McLeod, 1998; Corey, Corey & Callanan, 1993; Wehrly, 1995; Thompson, 1998; Sue and Sue, 1990; Pedersen, 1984; Green, 1982).

Inuit[1] in Canada's Eastern Arctic have undergone the rapid externally-generated political, economic, and social changes that create social instability and psychological threat. (Habermas, 1994; Larrain, 1994; Griswold, 1994; Orso, 1974). They are a people in transition, having entered the modern world of money, wage employment, technology, formal education, global media, etc. only within the last thirty to fifty years (Crowe, 1986; Berger, 1991; Tester, 1995; Brody, 1991; Condon, 1988). Much of the traditional lifestyle continues, with life lived in small geographically isolated communities. Hunting and fishing are primary sources of food. There is an intensely emotional connection to 'being on the land': people camp, clam-dig, berry-pick and simply walk in the hills, even around Iqaluit, at roughly 5500 people the 'city' and largest community in Nunavut. A number of people live permanently or intermittently outside the communities in outpost camps. The practice of traditional skills such as sewing home-prepared skins into clothing and boots continues. In most areas of Nunavut, Inuktitut is the first language even for today's children, and for many who are older, it is their only language (Government of the Northwest Territories [GNWT], 1996).

There is great political concern, however, about the threat of complete assimilation, the loss of identity and heritage. There is also overt and covert resentment about and resistance to implications that contemporary practices generally, be they political, legal, educational or social, are better than Inuit ways (Pauktuutit, 1991; Ernerk, 1993; Department of Education, Culture and

---

[1] Though known more commonly as *Eskimo* in other parts of the world, *Inuit* is what they call themselves and wish to be called by others. The singular form is *Inuk*.

Employment, 1996; Nunavut Implementation Commission [NIC], 1996). These feelings are understandable in a society in which residential schools, for example, made a concerted effort to discourage Inuit language and culture in efforts to assimilate aboriginals into Canadian life (Crowe, 1986; Tester, 1995; Brody, 1991).

Yet the modern world is unavoidable – nor do Inuit wish to avoid it. "Elders recognize that young Inuit must be able to deal with the contemporary world" (Ernerk, 1993). Survival as a people depends on being able to adapt to changing circumstances, at which the Inuit have excelled over countless generations. But survival also includes keeping what is good and useful and psychologically strengthening from the past (NIC, 1996; Legat, 1991; GNWT Department of Education, Culture and Employment, 1996).

In a time of rapid social change and the resulting personal and social problems, the need for coping skills and psychological strength is paramount. There is concern, however, that counselling, an import developed from Euro-North American theories, should fit with Inuit culture (GNWT Department of Health and Social Services, 1995; Pauktuutit, 1990, 1993a; Canadian Mental Health Association [CMHA]/NWT, no date).

Inuit traditional society was a nomadic hunter-gatherer culture, a type often described in anthropological and multicultural literature as non-Western, communal, cooperative, present-oriented, and with decision-making and behaviour focused on the group rather than the individual (Crealock and Bachor, 1995). Inuit of the Eastern and Central Arctic were spread out over a large area, living in small nomadic camps of extended-family members. Helping for problem situations was provided by elders, shamans, camp leaders and others seen as trustworthy and capable.

Contemporary professional counselling, on the other hand, is said to be based on values of self-actualization, personal choice, individual achievement, rationality and autonomy, which are seen as Western, and is perceived to entail behaviours and expectations that may be disrespectful or inappropriate in other cultures (McLeod, 1998; Sue and Sue, 1990; Corey, Corey & Callanan, 1993).

The following table is an example of a typical comparison of Western and non-Western perspectives. It illuminates the concerns regarding value differences that affect the appropriateness of counselling.

Table 1
Comparison of Values

Non-Western	*Western*
Primacy of the group and group goals	Primacy and uniqueness of the individual
Interdependence	Choice and independence
Compliance and conformity	Satisfaction of individual needs and wants
Harmony	
Security	Freedom
Control of feelings	Expression of feeling
Traditionalism and conservatism	Future orientation and innovation
Cooperation	Competition

Source: Corey, Corey & Callanan (1993: 249-250)

Corey (1996), McCormick (1998), Feehan and Hannis ((1993) and others specifically state that Western counselling has major limitations when applied to Native American/indigenous groups.

This uncomfortable juxtaposition clearly raises a number of key questions important to counselling practice with Inuit clients, which will be the driving force of this study:

- Are the above-mentioned non-Western values consistent with traditional Inuit values and worldview?
- If Western counselling values and practices have major limitations when applied to aboriginal clients, what specifically are those limitations as they relate to Inuit?
- What strategies are appropriate in helping Inuit clients?

The Inuit Mental Health Workshop held in Iqaluit in 1993 recommended that "research efforts should be made to investigate and record traditional Inuit methods of counselling and addressing mental health problems" and that Northern counsellors must have access to information and training, given in the communities, concerning modern counselling strategies as well (Pauktuutit, 1993a, Appendix). The new Government of Nunavut has established a foundational policy in which traditional knowledge (*Inuit Qaujimajatuqanit*) is to combine with modern knowledge to produce culturally appropriate and effective institutions and practices. The Bathurst Mandate, which specifies the guiding principals and goals of the government, states that Nunavut will be a place where "We respect the accumulated wisdom of our elders, examining and evaluating our actions based on the best of both modern knowledge and traditional ways" (GN Bathurst Mandate, no date: website link "Healthy Communities"). The Standing Committee on Culture, Education and Health stated in its first-year report that "Members want to see mental health workers incorporating both *Inuit Qaujimajatuqangit*, and a good knowledge of Inuit language and culture, with a specialized knowledge of mental health skills" (Nutarak, 1999: 14). This thesis will investigate these issues and address these goals.

Purpose

My personal counselling orientation is an integrative client-centred approach based on the belief that counselling will be appropriate and effective if it

is client-centred and client-determined, with direction and interventions chosen according to the client's values, perceptions and environment, within a trusting, accepting client-counsellor relationship. As a non-Inuit counsellor in a predominantly Inuit environment, I believe in the need to be culturally sensitive. It has, however, been difficult to determine exactly what cultural appropriateness in helping entails, for the information that is available is minimal and scattered. Thus we do not know what specific traditional strategies were; nor is it possible to know if modern counselling practices are suitable or unsuitable in working with Inuit who wish to retain some degree of traditional practice in helping situations. Assumptions in either direction may result in inappropriate and unhelpful practice.

My intent, therefore, is to investigate and compare both modern counselling and traditional Inuit helping, in order to identify the practices and values of each. I shall also investigate current Inuit perceptions of helpful and unhelpful counselling. Through a comparison of concepts and behaviours, I shall develop a grounded theory of effective and appropriate helping in Nunavut/the Eastern Arctic.

The following research questions emerged during the course of this study:

- What are the traditional Inuit beliefs about the nature of the world, important values, and ideas of human behaviour on which helping is based?
- What are the traditional strategies of helping, considered effective, that arose from these values, beliefs and attitudes?
- What are the values, attitudes and strategies of effective Western counselling?
- Are there multicultural strategies and interventions that may be more culturally appropriate than those of conventional counselling?

- What are the perceptions of helpfulness of younger Inuit who have knowledge of traditional ways as well as experience of modern counselling?
- How do traditional and modern conceptions of helping compare?
- What adaptations, if any, can and/or should be made for effective counselling with Inuit clients, whether traditionally-oriented or acculturated to varying degrees?

Based on experience gleaned over more than a decade, I suspected that at least some of the principles and strategies of contemporary client-centred counselling are indeed consistent with those of traditional Inuit practice, and therefore appropriate with both traditionally-oriented and variedly-acculturated Inuit. My purpose, however, is not to find data to support that hunch. My ultimate goal is to discover what traditional helping entailed; if there are in fact traditional approaches that are different from generic and multicultural counselling and more appropriate for traditionally-oriented Inuit clients; if there are specific strategies in multicultural cultural counselling that are more applicable; and what seems useful and effective in Inuit society today. Whatever the outcome of this comparison, it will then be more clear what skills and interventions can best be utilized, and under what conditions.

The research and conclusions are intended to be helpful not only to counsellors (both Inuit and non-Inuit) working in Arctic communities, including those in other circumpolar regions, but perhaps also to those working in other multicultural settings. New insights and knowledge may be revealed that can be generalized to counselling with other cultural groups.

Definitions

It will be helpful to examine the concepts of counselling and of culture, neither of which has clear definitions agreed to by all. Belkin (1988) says that counselling is a profession continuously evolving, and this is reflected in the confusion and difficulties of definition. Segall (1984) states that it is an impossible task to determine a universally agreed-upon definition of culture (and that doing so is in fact unnecessary, and possibly damaging, in the work of understanding the wonderful diversity of human behaviour). The concepts of both culture and counselling are of political and social importance in the north, however, and an attempt to clarify their meanings is thus important.

Counselling

The term 'counselling' is used in many contexts: educational, career, health, pastoral, financial, legal, and of course psychological and emotional. Feltham (1997) describes the difficulties and variations regarding definition, difficulties arising partly because the word is used in so many contexts, and because there is overlap in what is 'done' in each of these contexts: the giving of information and direction, listening, understanding, problem-solving, decision-making, and so on. A variety of non-counsellor workers such as business management, health providers, and staff of volunteer agencies are increasingly given training in basic counselling-related skills such as active listening and demonstrating understanding. Bond (1998) and Feltham (*ibid.*) discuss also the attempts of government and the profession to set boundaries for, systematize and regulate therapeutic activities. (In Canada, for example, different provinces/territories and professional organizations have different criteria regarding registration or official acceptance as a psychiatrist, psychologist, social

worker, school counsellor and so on. However, it is quite possible for virtually anyone to set herself up in private practice as a healer or counsellor.)

The type of counselling relevant to this thesis is that of helping persons who are in personal psychological discomfort, confusion or distress due to individual, interpersonal or social problems. The counsellor thus engaged may work in a variety of settings – schools, social service agencies, mental health services, hospitals or community nursing stations, community wellness centres and so on.

There is ongoing controversy about the differences between psychotherapy and counselling. Issues include type and severity of problem, theoretical differences, conscious versus unconscious, therapist training, intent and length of treatment (Feltham, 1997; McLeod, 1998; Belkin, 1988; Bond, 1998). Counselling is judged by some to be "a lesser form of psychotherapy…watered down…" (Feltham, *ibid.*: 13). Nevertheless, both lie along a continuum, concerned with helping others live a more satisfactory life, and both are built on the same theoretical foundations.

In this thesis I shall generally use the term 'counselling' rather than 'psychotherapy', for my experience has been that for many people 'psychotherapy' has greater connotations of mental illness, long-term treatment, and specialized theory and education. 'Counselling', too, is the word that is understood and used in the north.

The International Round Table for the Advancement of Counselling defines counselling as:

> a method of relating and responding to other people with the aim of providing them with opportunities to explore, to clarify and work towards living in a more satisfactory and

> resourceful way....Although the counselling process may be primarily non-directive or non-advisory, some situations may call for a more active intervention and counselling may be combined with guidance and the provision of information (Bond, 1998: 15).

The American Association of Counseling and Development gives not a definition but a broad statement of purpose: that its members are "dedicated to the enhancement of the worth, dignity, potential and uniqueness of each individual and thus the service of society" (Bond, *ibid.*: 16).

The Canadian Counselling Association states that "Counsellors have a primary responsibility to respect the integrity and promote the welfare of their clients. They work collaboratively with clients to devise integrated, individual counselling plans that offer reasonable promise of success and are consistent with the abilities and circumstances of clients" (Canadian Counselling Association, 1999: 4).

Feltham (1997: 8-9) provides his and Dryden's definition from their Dictionary of Counselling as:

> a principled relationship characterised by the application of one or more psychological theories and a recognised set of communication skills, modified by experience, intuition and other interpersonal factors, to clients' intimate concerns, problems and aspirations. Its predominant ethos is one of facilitation rather than of advice-giving or coercion. It may be of very brief or long duration, take place in an organisational or private practice setting and may or may not overlap with practical, medical and other matters of personal welfare. It is both a distinctive activity undertaken by people agreeing to occupy the roles of counsellor and client...and it is an emergent profession...It is a service sought by people in distress or in some degree of confusion who wish to discuss and resolve these in a relationship which is more disciplined and confidential than friendship, and perhaps less stigmatising than helping relationships offered in

traditional medical or psychiatric settings.

The British Association for Counselling (Bond, 1998: 210-211) has developed the following definition:

> The overall aim of counselling is to provide an opportunity for the client to work towards living in a more satisfying and resourceful way. The term 'counselling' includes work with individuals, pairs or groups of people, often, but not always, referred to as 'clients'. The objectives of particular counselling relationships will vary according to the client's needs. Counselling may be concerned with developing issues, addressing and resolving specific problems, making decisions, coping with crisis, developing personal insight and knowledge, working through feelings of inner conflict or improving relationships with others. The counsellor's role is to facilitate the client's work in ways which respect the client's values, personal resources and capacity for self-determination.

Taimainnut, Pauktuutit's (1993b) counselling handbook, states a broad definition: "A caregiver/counsellor is someone who listens to another's problems and sometimes helps them make choices. Together [their emphasis] it is sometimes easier to work towards solving a problem" (3).

All the definitions at least imply the concept of a respectful helping relationship in which client and counsellor work together based on client needs and choice, and the idea of facilitation rather than guarantees of resolution – that is, providing opportunities and potentially helpful strategies for possible change. The AACD's definition, however, is very limited and abstract, with no indication of the role of counsellor as specific from, say, that of a parent. CCA's is a general overview. Pauktuutit's is concrete but limited, not giving further description of kinds of problems or counsellor aims and values. IRTAC's definition is also quite abstract, as is Feltham and Dryden's.

The definition of the BAC, however, seems most useful for the purposes of this paper: it provides a clear and concrete aim; it outlines the different kinds of counselling that may be involved; it describes the specific issues and problems that clients may be facing; and it specifies clearly that the counsellor's role is to help the client find solutions that fit with her life, and which are based on her choices. BAC's definition is clear, concise and concrete, and integrates the basic values of counselling – respect and client self-determination. The problems and types of clients described, and the language used, are appropriate to Northern counselling practice.

Culture

Definitions of culture also vary: Eriksen (1993) cites Kroeber and Kluckhohn's (1952) discovery of 300 definitions. Bhabha (1997) maintains that unless it is possible to identify a transcendent humanity, one cannot ethically speak of culture. Nevertheless, an investigation of culture-specific counselling requires an examination of the concept of culture.

Sue and Sue (1991) define it as "all those things that people have learned to do, believe, value, and enjoy in their history" (35).

E.B. Tylor (1958) in 1871 defined it as "that complex whole which includes knowledge, belief, art, morals, law, custom, and any other capabilities and habits acquired by man as a member of society"(1). Culture, in other words, is everything that is socially rather than biologically transmitted. This is the most commonly-accepted social science definition (Marshall, 1998).

Tylor's broad definition of culture seems most sensible, and certainly fits with Pedersen's (1991) argument that a cultural definition in counselling should include not just ethnographic factors but also demographic and status variables and

formal and informal affiliations. As Griswold (1994) points out, any understanding of a group must take into account not only its symbols and meanings but also its social structure – patterns of relationships, economic and political factors, etc. Each grows out of the other and changes in one part effect changes in others. This is especially important to keep in mind regarding a culture in transition such as the Inuit. Language, knowledge, technology, patterns of relationships, political and economic structures, sex roles, affiliations, teaching and learning, the percentage of children in the population – virtually nothing is the same in Inuit society as it was fifty years ago, even thirty years ago. And the present cannot again be the past.

It is worth remembering, too, that there is no objective concrete thing such as culture – only people thinking, doing, feeling, growing, changing (Rohner, 1984: 115).

The term 'Inuit society' will also be used, as "a group of people who share a common culture, occupy a particular territorial area and feel themselves to constitute a unified and distinct entity" (Marshall, 1998: 624), for all three criteria define the Inuit of the Eastern Arctic.

<u>And...</u>

The terms *conventional counselling* and *generic counselling* are used interchangeably to mean an integrated process of helping that does not adhere to a specific theoretical orientation but which fuses strategies from different approaches and makes eclectic use of interventions, and which has become the standard model in contemporary counselling, as discussed below.

In this study, the term *client centred* refers to an approach in which focus is on the client's needs, values, context and perceptions, and in which client decisions determine direction.

The specific term 'Inuit' rather than the more general term 'aboriginal' will be used. 'Aboriginal' is often used as equivalent to 'First Nations' or its predecessor 'Native Canadians', but both these terms refer to those who are 'Indian'. As the federal Department of Indian and Northern Affairs (1997) explains, " 'Indian' peoples in Canada today prefer to be known as First Nations. Canada's two other Aboriginal peoples are the Inuit and the Metis"(5). It is sometimes forgotten that although Inuit are also aboriginal/native Canadian, they are a group that is distinctly different linguistically, ethnically, historically and culturally.

Regarding language and gender: until English becomes like Inuktitut and Finnish, in which pronouns have no gender, I shall use both 'he' and 'she' randomly.

Finally, this thesis is written in plain English as much as is possible within the requirements of scholarly research. Although the immediate purpose is to present an academic research study, the ultimate objective is that this thesis have practical value for the Arctic. Copies of the analysis of the interviews were also provided to Inuit readers, for whom academic jargon may be especially unfamiliar. And if translation into Inuktitut becomes necessary, paraphrasing will thus be less arduous.

Chapter 2: Path to Purpose: Literature Review and...

Introduction

In the literature I had read over the years of my teaching (Condon, 1988; Minor, 1992; Canadian Psychiatric Association, 1988; Malaspina College, 1980; Feehan and Hannis, 1993; GNWT 1990, 1995) and the conversations I had had with researchers and others interested in counselling, the political, professional and popular assumptions were generally that Inuit culture (and indigenous cultures generally) and Western-based counselling are different in some fundamental ways, and that culturally-specific strategies are necessary for effective counselling. There does not, however, seem to be empirical research that supports or disproves those assumptions, or investigates the similarity or dissimilarity of Inuit values and behaviours and those of counselling. Neither does there seem to be an organized body of knowledge about Inuit traditional values and strategies related to helping.

Two events prompted me to examine such assumptions (including my own) and initiate this investigation. One was an incident I witnessed. A person, distressed and frustrated, sought help from a *qallunaat* (non-Inuit) trained counsellor respectful of Inuit culture. Having agreed that the concerns were valid, the counsellor then said that Inuit do not worry about such things, that it is "we white people" who get upset about unfairness, whereas Inuit understand that life is sometimes unfair but that "what goes around comes around." With good intentions, trying to show understanding of and respect for Inuit culture, the counsellor made the student an 'Inuk,' different from 'we white people,' and thus dismissed his very real feelings and concerns.

Secondly, in my years of teaching counselling with Inuit students, we have always discussed the appropriateness of the values, skills and interventions. However, I have often had the impression that I am pushing students to find incompatibilities and that they are unsure what to say. The issue usually mentioned was possible counsellor discomfort with eye contact with an older client. I had initiated other questions, such as discouragement of emotional expression in traditional society. There has been no consensus in such discussions: individual, family, and community variations always resulted in diverse opinions. Nor have the counselling behaviours been deemed inappropriate; in fact, feedback consistently showed that students believed the skills they learned were applicable and helpful. The viewpoint has been that people are different and one might therefore need to adapt certain behaviours to fit a specific client (the eye-contact issue, for example).

Many questions about my own assumptions as well as those of counselling had come to mind as a result of these occurrences and from a reading of the literature on counselling and multiculturalism. Has acceptance of certain Western ethnological and social theories led us to promote a 'better' Western political viewpoint and insist on its acceptance by others (Craib, 1992; Clifford, 1988; Taylor, 1994; Tomlinson, 1997; Marshall, 1998; Griswold, 1994; Larrain, 1994; Friedman, 1994; Pace, 1986; Obeyesekere, 1990; Sahlins, 1995)? Have we as counsellors, though criticizing perceived Western prejudice, in fact contributed to it with an insistence on 'them' and 'us'? Have we, with good intentions, influenced – perhaps insisted upon – other cultures adopting this Western conception of 'them' and 'us' (complete with its value judgments about both), and thus used a 'we know best what you need to do' authority to discourage 'them' from the opportunity and right to act, think, explore, draw conclusions, adopt and adapt whatever they wish without our judgment? Is Sahlins correct in his assessment that:

> There is a kind of academic defence of the cultural integrity of indigenous peoples that, though well-intentioned, winds up delivering them intellectually to the imperialism that has been afflicting them economically and politically. I mean the paradox entailed in defending their mode of existence by endowing it with the highest cultural values of Western societies (1995: 119).

Have we done our clients and the profession a disservice by being politically correct?

Informed decisions cannot be made unless all the factors involved are understood; and if effective, relevant counselling strategies are to be developed, all voices must be examined, none dismissed without consideration.

Towards this end, the survey of the literature focuses specifically on material concerned with psychological, personal and interpersonal problems of Inuit, and their resolution, rather than on more general anthropological studies. A brief history of political, economic and social changes in the North which have led to the development of 'professional' counselling services in the North, and an explanation of Northern conditions of practice, are also discussed as foundations of this study.

Literature Review

Introduction

Over the decades, thousands of books, articles, and studies have been written by cultural anthropologists, historians, medical investigators, linguists and sociologists about every aspect of Inuit life. The Internet database FirstSearch alone reveals more than 4200 references, plus more than 160 dissertations written about Inuit in the past twenty years. Inuit organizations like the Inuit Cultural

Institute and Pauktuutit, as well as individuals and local groups, have done much research and recording of traditions and stories. (Anoee, 1978; Avutuq Cultural Institute, 1984; Pauktuutit, 1991b; Owingayak, 1986; Inuit Cultural Institute, 1988).

There are also numerous contemporary studies about culture clash in Canadian counselling practice with indigenous peoples generally and in remote northern communities particularly (Delaney, 1995; Tester, 1995; Zapf, 1991, 1993); value and ethical issues in aboriginal and northern practice (Delaney, Brownlee, Sellick and Tranter, 1997; Delaney and Brownlee, 1995; McCormick, 1998); and issues in aboriginal and northern counselling education (Castellano, Stalwick and Wien, 1986; Ballard-Kent and Cromwell, 1985; Feehan and Hannis, 1993; Fletcher, 1998). Most of such studies, including those done in the western Northwest Territories where the indigenous peoples are primarily Dene and Metis, refer to First Nations groups rather than Inuit. The literature, certainly in Canada, sometimes appears to speak of aboriginals as though all indigenous peoples had similar beliefs and behaviours. Thus, spiritual and healing concepts and practices commonly perceived as 'aboriginal' – the medicine wheel, purification rituals, healing circles, for example (Feehan and Hannis, 1993) – are sometimes assumed to be traditionally Inuit as well. Although there may be similarity among values, as there is among many traditional societies – respect for elders and kinship loyalties, for example (Department of Education, Culture and Employment, 1996; Feehan & Hannis, 1993; Malaspina College, 1980) – norms, beliefs, spiritual practices and life differed. In personal conversations, for example, Inuit students who have participated in training or healing workshops in the western NWT have expressed respect for First Nations rituals. They have said, nevertheless, that such rituals have not had cultural meaning, and some have spoken of feeling uncomfortable.

There has also been considerable literature over the years about the types and prevalence of mental health and interpersonal problems evident in various Inuit and circumpolar Arctic communities. Investigations include: the bases and manifestations of certain behaviours and attitudes (Inuit psychology); lifestyle and value clash as causes of social, personal, and interpersonal problems; traditional Inuit perceptions and concepts of physical and mental health/illness; psychiatric assessments of mental health; and overviews of and general suggestions for therapeutic interventions. As mentioned, little information is provided, however, in terms of specific interventions, empirical comparisons of traditional and Western helping, or evaluations of effectiveness. I shall nevertheless review what is available, for the studies will provide a deeper understanding of the sources and manifestations of personal and interpersonal problems among Inuit, as well as general perceptions of what is needed.

The literature will also provide a context for the findings of this research, wherein the portrait that emerges from the data can thus be viewed against a background of other portrayals. For though there may be little specific information regarding Inuit helping systems, the literature provides abundant observations and interpretations related to such foundational factors as worldview, values, and attitudes regarding self and others.

Inuit Well-being and Dysfunction: The Literature

A few of the research findings surveyed here were authored as long as thirty years ago, but my focus is on studies during the past fifteen years, for Canadian Inuit life has changed dramatically since the 1970s. There have also been many changes in medical and psychological understanding of mental disorders. Thus, for example, conclusions and diagnoses that were based on a belief, thirty years ago, in purely environmental causes may be questionable in the face of

current knowledge of biological factors in distress, dysfunction and disorder. Whatever issues and practices have continued to be relevant would, I think, be evident in the more contemporary research.

Medical Studies

Bloom (1972) discussed the prevalence and diagnostic categories of psychiatric problems among Alaska Inuit, and the role of cultural transition in such problems. He cited evidence of sex-related differences in psychological dysfunction, as well as in modern management of problems. (Women, who had higher rates of neuroses, character disorders and crises, may come to the attention of medical staff and social agencies. Men had higher rates of psychoses, in which case medical intervention was probable; but those with less obvious disorders and crises more frequently came to the attention of the judicial system.)

He commented on the lack of "dovetailing between the growing literature on the family unit and cross-cultural research" (211). Anthropological cross-cultural research, he said, has generally focused on how individuals are shaped by their cultures and the changes that come with culture change, whereas sociological family studies view families as social systems in themselves, which influence their members' psychological health. His overall conclusion, unparticularized, is that political changes be "brought to bear on the lives of individual people in such a manner that will strengthen their internal psychological reserves and strengthen their internal sense of identity and pride" (214).

His 1973 discussion follows up on his observations of higher rates of emotional disorder and migration among Inuit women as compared to men, and speculates on the connections between female psychopathology, traditional male/female roles and self-esteem, traditional expectations of suppression of resentment and hostility, and migration from small communities to larger more

culturally-mixed centres. He points out that traditional features such as male dominance and female submission/depreciation, and "impounding of hostile and competitive impulses" (448) served to maintain the integrity of traditional Inuit society, but cross-cultural influences and changed opportunities resulted in a surfacing of suppressed female resentments and hostilities, leading to rejection of old roles. In rejecting the old roles, however, an Inuit female still carried at least part of the negative self-image that had made it possible to sustain the past patterns. Migration led to increased opportunities for unions with *qallunaat* [non-Inuit] men, which, he says, were often based on an intense romanticism. These relationships frequently broke down, the woman often having been a sexual partner only, resulting in further emotional distress. "Thus the women who are suffering from confused identity in their rejection of former roles fail in achieving a new sense of identity in the larger villages and cities" (448).

Sampath (1974) provides statistical information about mental illness rates, and discusses the effects of modernization and culture change, especially the development of larger communities with a wage and welfare economy. Traditional camps were small and loosely organized, based on family relationships or group consent for membership. Individuals could leave if they chose and join any other camp that accepted them. Such movements "functioned as an escape mechanism" (481) in situations of conflict, stress, or dissatisfaction.

Movement by choice also deterred the rise of excessively powerful leaders. Apart from kinship relationships (e.g., elders as influential), only camp leaders and shamans had 'status', based on their skills and powers. Permanent-community settlement, however, promoted stratification – among Inuit themselves, not only as compared to *qallunaat* – based on inequalities in material goods, housing, relationships with *qallunaat*, opportunities, etc. Social inequality was not unknown

to Inuit[2] – Sampath describes one powerful individual who had less successful camp members as 'slaves' – but assessment of personal qualities, rather than social categories or external criteria, was the traditional norm in the allocation of status.

Noting that while high rates of psychosis are probably due to genetic factors related to a small gene pool, Sampath speculates that the above-mentioned changes may well contribute to other disorders. Perceptions of poverty and resulting self-assessments, new notions of 'success' for men, overcrowding and inability to escape from stressful living situations – all may be implicated in emotional distress and illness. He also notes that women had higher rates of problems: he too proposes that imported more-democratic views of male-female relationships versus the patriarchal, women-as-subservient structure of traditional life led to open resentments. Women also, he states, tended to bear the brunt of men's frustration with and resentment of loss of identity, role and power.

Both Bloom and Sampath outline cultural transitions, problems evident, and possible causes of emotional disorder, but neither provides specifics of traditional or then-current psychiatric strategies for alleviating such problems.

In 1981, Sampath investigated depression among Inuit from a cross-cultural perspective, describing three case studies. The concept and its expression exist in the culture, and its causes and manifestations are identical to depression in any other culture. What differs, he explains, is that depression in Inuit may more often be made known to others non-verbally, rather than specifically expressed verbally. When dealing with Inuit patients, medical personnel must therefore be alert to its behavioural manifestations, rather than depending on an oral report. In describing his case studies, he briefly mentions using psychotherapy with his patients, but

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[2] This is also evident in the elders' interviews, with references to 'poorer' families and attitudes towards orphans.

explains nothing about his process or strategies, or about patient responses to the therapy.

In 1976, Bloom and Gelardin explored the syndrome of Inuit sleep paralysis, a syndrome well known among Inuit and documented in the anthropological and medical literature as early as the beginning of the 20th century. Sleep paralysis is described as a temporary inability to move, happening in the conscious transition period between sleep and waking. Modern medicine, the authors state, has associated it with narcolepsy-catalepsy and to dissociative hysterical reactions related to Inuit personality dynamics, but its causes have not been determined.

In their study, the authors describe one woman's experiences with medical staff to whom she had mentioned her experience of the phenomenon: attempted interventions had included a psychological assessment, an EEG, and valium, all of which had created new stresses and distress.

They discuss the traditional explanations for the phenomenon. The body and soul are believed to be vulnerable to spirit influences during sleep: sleep paralysis may result when a spirit has taken control. As well, it is believed that during sleep, the soul may leave the body; sleep paralysis can therefore be the result of the soul not yet having returned. Traditional helpful treatment, as explained by informants, included discussion of the event with others – telling others about it was seen as helpful. Patience, taking it easy and waiting, with gentle attempts to move parts of the body, was also helpful. Others had stated that the condition is related to the quality of one's life: 'good' people experience it less often than 'bad' people.

The authors take the position that mental health workers must learn to undertake a cross-cultural interview, to ask the right questions: questions about the

informant's view and knowledge of the condition; his/her conceptualizations of its meaning and causes; its prevalence in the individual's environment; other counsellors' intervention attempts; and the patient's beliefs of what is required for recovery. They stress that such information is not only crucial for treatment, but that the process of information-acquisition "is an effective way of reducing the distance which may exist between a patient and those charged with helping her" (25).

These conclusions are familiar from client-centred counsellor training and practice, in which emphasis is placed on understanding the client's worldview and reality, and involving client input in the development of interventions.

Abbey, Hood, Young and Malcolmson (1990) discuss Inuit women's mental health issues related to spousal and sexual assault. (Women were referred, or referred themselves, for help much more frequently than men.) The most common reasons for referral (in descending rank) were: depression; suicidal ideation and attempts; family relationship problems; grief reaction; and physical or sexual assault. (They also mention male statistics: women complained of depression more than twice as often as men; men thought of or attempted suicide almost twice as much as women; men reported relationship problems much less frequently; reports of sexual or spousal assaults were rare in men.) Concurrent female social problems included interpersonal difficulties (most often), separations or deaths, economic problems, personal and/or familial alcohol problems. The most common diagnoses were adjustment and stress reactions, affective disorders, and personality disorders. Women had significantly fewer diagnoses of psychosis or conduct disorder than men. Depression, the authors say, seemed to be correlated to marital problems and spousal assault, conflicts related to women's new roles and lifestyle transitions, alcohol use in families, and economic difficulties.

They note that although family violence and childhood sexual abuse were common problems, they were a relatively infrequent reason for referral. Suggested factors were that the referral source may be unaware of such events, and women themselves were initially reluctant to talk about their experiences. However, they report that women felt more able to discuss these issues after the initial consultation. Community openness about the issues and support for victims was increasing, although issues of confidentiality, especially in the smaller communities, was a possible problem.

Most of the women were interested in treatment, and inpatient care was seldom necessary. (Drug therapy was used in about 30% of cases.) Nursing staff, a community health representative, a social services worker, or a community woman identified as empathic and helpful by the patient or the interpreter or the nurses, were the four most common sources of counselling. Some communities also had developed peer-support groups.

Except for the mention of empathy and support, no other details are given of counselling process or content, either in individual counselling or in self-help groups. The authors stress that culturally sensitive treatment programs must be developed for use in the communities. They cite also group leaders' requests for training in facilitation techniques.

The same authors (Hood *et al.*, 1990) briefly describe psychiatric service delivery in the Eastern Arctic. They provide no description of treatment content or process, describing only the framework of service, which includes a regularly-scheduled visiting consultative psychiatric team from Toronto, mental health workers from the Department of Social Services, community social workers and trained nursing staff, and community consultation.

Kirmayer, Fletcher and Boothroyd (1997) investigated Inuit attitudes and social-distance responses to deviant behaviour that might indicate psychiatric disorder, focusing on withdrawal and threatening behaviour. They first provide some relevant ethnological information about traditional life: small mobile groups consisting of a few extended families that separated and rejoined according to season or availability of game; movement from the group as a way of avoiding confrontation with excessively deviant or violent individuals; ostracism or killing in cases of extreme deviance or total dependency; tolerance of non-threatening eccentricity. In modern life, they say, the same tolerance continues, and unusual or irritating behaviour is ignored, minimized or explained away. But seriously aggressive individuals or those requiring overwhelming supervision and caretaking are now brought to the attention of legal or medical personnel.

Although there was no general Inuktitut word for mental illness, they say, several types of disorder were recognized, corresponding to modern diagnoses of epilepsy, dissociative disorders, and depression. Agitated incoherent behaviour was also perceived as a distinctive type. Attributions for such disorders included: physical or environmental causes such as hereditary or congenital reasons; culture-change or socioeconomic factors such as alcohol or family violence; psychological or emotional processes such as grief, fear or worry; and demon or spirit possession. Hallucinations especially tended to be seen as possession.

This latter explanation occurred in all educational, occupational and acculturation levels, although older people with less schooling tended more often to attribute demon-possession. The authors note that spirit-possession explanations often existed in conjunction with other explanations such as trauma or excessive worry. Possession could be distinguished from other forms of mental illness in that a possessed person did not recognize the existence of a problem.

Overall, the authors' results indicated that attitudes regarding social distance from the mentally ill were more influenced by gender, age, education, familiarity with the behaviour and expectations of recovery, than by specific behaviours, labels or causal beliefs. Withdrawal was seen as negatively as threatening behaviour. Moral and spirit explanations correlated with a greater expectation of recovery. Excessive worry was associated with a lesser expectation of recovery, but not with social distance. They note that respondents' responses regarding social distance may not be accurate, for self-reports do not necessarily reflect actual behaviour.

They suggest that integration of the mentally ill in the community requires public education efforts oriented towards familiarizing people with illnesses and emphasizing the possibility of recovery.

Sociological and Psychological Research

Schaefer and Metayer (1974) examine Inuit personality development in both the past and modern times. Traditionally, they say, Inuit did not have a strong tribal culture; families were individualistic and independent, with camps consisting of primarily small extended-family groupings. There were no 'chiefs'; those seen as wise were listened to, "but without compulsion" (470). However, they state that within the family group, individuals were interdependent and decisions were based on the family's needs. Modern Western lifestyles and social organization, they say, "have displaced family priorities in an extreme manner" (*ibid.*). This lifestyle has been imposed on Inuit, and the loss of extended-family support has left individuals feeling insecure and directionless. They also cite Briggs' (1970) research showing that Inuit were traditionally strongly encouraged from childhood to repress feelings of anger and violence, an element of socialization that has changed in the cultural transition.

They compare and contrast traditional and modern [early 1970s] versions of the Inuit nuclear family. In the former, father was a highly respected provider for all family members; mother was the loved centre of the family, tending to the needs of home and children, and constantly physically close to her children in their first two or three years of life; children felt completely secure and had "ideal parent figures" to imitate in their development to adulthood; family interaction was very close, with intense interdependence but "extreme personal tolerance" (472).

In modern families, father has lost the respected hunting prowess and independence, working instead at menial paid jobs or "shamed into the status of a welfare recipient" (*ibid.*). He thus feels useless, worthless, and dependent, and deals with the resulting emotional distress through alcohol and violence followed by remorse and suicidal acts. Mother has lost her important role, as clothes, food, etc. are no longer made by her but bought; she feels idle and useless, becoming less caring and understanding of her children, and whiles away her time in pointless activities outside the home. Children thus become less secure, less well taken care of, and no longer have ideal role models. Confusion, frustration and rebellion result. Family interaction is no longer close: anger is expressed, and physical abuse of children and wives develops.

They also compare traditional and contemporary Inuit social values, attitudes and practices. Personal qualities of skill and competence counted in the past, whereas modern materialistic concepts of success have become more important. Sharing of meat was a primary value needed for survival and meat continues to be shared, whereas money and modern goods are not shared, and the concept of 'everybody for himself' is more prevalent. Education resulted from imitation and active involvement in family life, without coercion; modern education comes from outside the home, where individual personality is less respected and conformity expected, which results in loss of respect for parents and

authority. Traditional emphasis on restraint of anger and violence has been displaced by a modern view of 'express your anger' and media exposure to much violence. Dysfunction is the result of imposition of "our neurotic Western society" (476).

Halpern (1987) examines Inuit mental health from the point of view of differences in concepts of time. He relates mental health problems and maladaptive behaviours to "unresolved conflicts resulting from an individual's inability to integrate and internalize linear and cyclical time frameworks which overtly do not cohere" (214). Linear time is defined as:

> a mechanism of replacement and substitution....[with] no fixed terminus, no precedent and its progression is not easily anticipated...Links between past and future can be conceptualized but their relationship is neither implicit nor readily foreseen...The cumulative aspects of culture thus do not necessarily have a logical coherence or predictable order (*ibid.*)

Cyclical time, he says, "always has precedent, is recurrent and in some ways marked and sanctioned" (215), especially as it relates to the natural world in seasonal, daily, and ritual activities. "Cyclical time provides coherence and continuity, linear time innovation, creativity and eventually destruction or the collapse of one cultural system and the emergence of another" (216).

While cyclical and linear time are of course experienced simultaneously, Inuit, he says, perceive life and experience according to cyclical time. The requirements and nature of modern life, however, are structured in linear time, which results in maladaptive behaviours and psychological disturbances in Inuit. The easy availability of food/housing/clothing, the nature of modern work, settlement in permanent communities, the advent of new technology and entertainment – all mean that Inuit are no longer required to attend to and

participate in the cyclical patterns and activities that were required for survival and self-maintenance in the past. "It is not necessary to do anything to affirm life. there are no essential tasks" (217), especially for young people. Monotony. boredom and poor motivation result, and alcohol, drugs and suicide become ways out of the mental distress.

Traditional life, Halpern says. required cyclical-time aspects such as planning, flexibility, options, awareness of the consequences of one`s actions for self and others, and attention to both what has been learned from the past and the needs of the future. Conflict resolution, too, was set in a cyclical time concept of interdependence and learning from others, in which family problems. for example, were solved by getting together and talking over the issues. In the linear-time nature of modern life, Inuit have lost the use of such processes. Inuit mental health problems such as alcoholism and suicide, he says, "are directly related to wider world values where space and time are viewed as consumables without the balance of cyclical referents" (225), and what cyclical referents are evident in modern life are oriented to the continuity of Euro-Canadian culture. "Culturally appropriate family therapies and community programs need to be devised by social scientists sensitive to the local value system" (214).

This final statement reflects the purpose of this thesis. However. his conclusions regarding time-concept differences and effects leave me puzzled. For example. he describes snowmobile use versus dogteam use as an illustration of linear versus cyclical time. Snowmobile use. he says, entails a person/machine/land relationship requiring learned skill in machine maintenance and a constant alertness, search for landmarks, attention to danger, etc. while driving, activities that fit within a linear time framework. Dogteam use is, however. a cyclical-time person/animal/land relationship, apparently not requiring knowledge of maintenance. and "the dogs look after their owner" [22]. The elders' descriptions

of dogteams certainly indicate the need for highly-developed learned skills in training and handling, maintenance of dogs and the related equipment, control of the dogs, as well as alertness and attention while driving. As Pauloosie Angmaalik says, "Yes, the dogteams had to have a driver who was able to control them, just like a skidoo has a driver" (Introduction: 99).

In addition, it seems impossible to think of a goal or modern-life activity that does not involve at least some degree of planning, consideration of consequences, prior knowledge of some kind, and thought of what is wanted or needed. Young Inuit may perhaps not be doing much (this weekend's paper makes the same claim about British youth) for a number of reasons including culture change, but any activity, traditional or modern, (even drug use or suicide) requires attention to and implementation of such skills and strategies.

Both Schaefer and Metayer's and Halpern`s portraits of an idealized past and a dysfunctional present seem to me stereotypes of the romanticized 'noble savage' and leave me with the impression – obviously unintended by the authors – that they see Inuit as needing protection from the outside world, incapable of adjusting to change or coping with difficulties. I am reminded of Krause's statement of our "tendency to totalise and essentialise and to be infatuated with those who are different to the point of assuming an orderliness about them which does not apply to oneself. This process is in itself racist, or can be" (1998: 162).

Berry (1985) examines the aspects of acculturation especially as they relate to mental health. He defines 'acculturation' as varieties of adaptation in which the individual or the group deals with two central issues: whether the existing cultural identity is valuable and worth retaining; and whether positive relationships with the larger, or dominant, culture are desirable. The answers may reflect four modes: assimilation (giving up existing cultural identity and moving into the dominant group); integration (maintenance of cultural integrity but membership in the larger

society; separation (self-imposed withdrawal from the larger group); or marginalization (little identification with either the cultural identity group or the larger society). The first three are forms of adaptation, the last a highly stressful crisis.

Marginalization, with its sense of belonging nowhere, presents the most obvious possible health impact. But he emphasizes that assimilation, with its loss of culture, and separation, implying resistance and conflict, may also affect mental health. Northern natives, he says, are especially vulnerable because their acculturation has generally been involuntary.

He outlines several factors which may affect the health of the acculturating group's members:

- the nature of the dominant society (culturally pluralistic or monistic), and its assessment and level of acceptance of the acculturating group
- the nature of the acculturating group (e.g., native or immigrant; nomadic versus settled, with differences in factors such as population density, level of sociopolitical systems, status attributions and built-in support systems)
- psychological characteristics of the acculturating individuals (e.g., prior knowledge of the language and culture of the larger group; motives, attitudes and experiences re contact; education, gender, age, marital status, and employment; knowledge/skills: cognitive control; identity confusion or consolidation; congruity between expectations and experience)

The health consequences of acculturation, he states, are not necessarily negative. New opportunities and benefits may result depending on how the above variables are managed, and while some groups have huge difficulties, others adapt quite well. There is, however, no discussion of how acculturating group members with mental health issues can be helped to achieve equilibrium.

Olsen (1985) too examines the health consequences of culture change in Greenlandic Inuit society. He discusses the impossibility of returning to the traditional subsistence lifestyle due to the industrialized/technological nature of the modern world, and the health consequences (poorer standard of living, disconnected lifestyle, resultant social maladjustment) that result from a mixed economy of subsistence and some money. The change from a self-supporting community to one that depends on Danish financial support and thus produces a "receiver mentality" in the Inuit and a "supporter" identity in the Danes (29) has created inner conflict and guilt in Inuit, as well as an internalized anger at being spectators in an economy wherein Danish immigrants are the producers and owners.

He notes that although Inuit have always quickly adopted and adapted to new technology that has improved life, community health has been affected in those communities where technological change has been imposed rather than chosen, and where communities have lost people and skills because of movement to technological centres. He points out that attitudes, dialect, social structure, etc. may be completely different in neighbouring settlements, having developed to meet the unique needs of each group. Though nomadism is said to be a cultural trait, he says that "Inuit are very attracted to the same place" (29), with unique local communities thus disintegrating. Such movement creates stress and emotional instability as well as family disintegration, especially if no replacement is found for the strong group/family support system evident in settlements. Though a few families adapt quite quickly, for most it may take several generations to become stabilized.

Industrialization of natural resource acquisition, and Inuit reluctance to join in, has resulted in reduced sea and land animal populations, and concomitant

reductions in Inuit economic bases and living standards, and thus mental and physical health.

Language differences create conflict and lack of understanding. This conflict involves not only Greenlandic and Danish, but differences in dialect, to which people may have strong emotional attachment. (The West Greenland dialect is dominant and has long suppressed other dialects, he explains.) Olsen also believes that "different traits of character can suffer due to this linguistic conflict. Self-control, responsibility and standards of appreciation are some of these central personal traits" (31).

Overall, he concludes, Inuit psychology is different from the Danish. In addition, linguistic and social conflict makes young people, especially, vulnerable to an "existential crisis" (*ibid.*) at a crucial stage in their development. "Inuit standards of valuation and the Inuit psychology in daily use must be accepted and utilized" for future healthy development, but no details are given.

Kabel and Lyberth (1995) present some observations and hypotheses about psychological and behavioural problems evident in Greenland. They state that during their visits as consulting child psychiatrist and psychologist, people were especially interested in information about the causes of conduct disorders and the consequences of neglect and lack of emotional stimulation. They found a high rate of conduct and attachment disorders especially among boys, a large group of verified sexual abuse especially involving girls, and many children with severe and prolonged grief/crisis reactions related to the death of a parent.

They propose that the traditional behaviours of not talking about feelings generally, and especially not talking about one who had died (because it would disturb the dead person's spirit) may contribute to pathological grief reactions. As well, the past rituals and taboos surrounding death are no longer followed and no

effective rituals have replaced them; people thus do not know how to mourn or communicate their emotions.

Regarding the conduct disorders among boys, they explain that traditionally boys were loved, "almost worshipped" (75), for as hunters they ensured the survival of the family, including parents in their old age. Boys were therefore brought up to be extremely confident, energetic and independent, but in experiences with their fathers on the land, they also learned to control impulses and selfish needs. Boys are still admired and allowed to do what they please with few limits, but in the context of modern life this creates unsocialized children. The authors speculate that this also is a factor in sexual abuse: boys are accustomed to do what they want and the girls are used to it.

Social Problems and Health Research

In 1985, The Working Group on Problems of Family Health in Circumpolar Regions (an initiative of the World Health Organization), identified violence, crime, suicide, child neglect, alcohol abuse, and disease as major family health problems, and reiterated the importance of acculturation, with its changes in social systems and family patterns, as a factor in such problems.

Alcohol abuse is identified as the single most important health problem in the circumpolar world, not only because of the physical health effects but because of its high correlation with family violence, suicide and rates of venereal disease. They point out that not much is known about the reasons behind the abuse, and that no decisive resolution has been found. Attempts at restriction have, in fact, increased consumption. Causative factors suggested include the fact that alcohol is a fairly recent import, with Arctic peoples not having had the time to develop the rules and rituals for drinking that have evolved in alcohol-adapted cultures. They also note that the traditional habit of eating and drinking as much as possible in

times of plenty is a highly dysfunctional pattern in alcohol consumption. Hypotheses of differences in alcohol metabolization are also noted.

Suggestions and recommendations include, first, the need for both the group and individuals to regain a sense of having control over their own lives. In addition to control (however that becomes defined in the group) in political, institutional, and economic systems, the authors emphasize the need for the development of individual "cognitive control" (14). That is, stressors create negative outcomes when the individual perceives him/herself as having no control over the stressor; whereas results can be positive if the individual sees stressors as opportunities for change, in which s/he can be the agent of change.

Effective acculturation, they say, necessitates an integrative model in which those aspects of the new which are irreversible or considered desirable or necessary, combine with desired traditional aspects. Communities and individuals thus draw selectively from both cultures to create a life in which they are accepting of, comfortable with and competent in both worlds, in a way which fulfils their needs. Such a model requires community ownership of problems and resolutions; improved education in the native language and culture as well as in professional fields; controls and education re alcohol, drugs and firearms; and preventive measures in health and social factors.

They also cite the urgent need for systematic and comparative data on psychocultural factors – a need to which this dissertation is a response.

Forsius (1985) discusses the problems of Greenlandic and Northern Finnish Inuit/Arctic children in families with absent fathers, citing the qualitative difference between past and modern paternal absence. The nature of modern work and life make it more difficult for boys (even for those in Western societies) to spend as much time with their fathers, understand the nature of their fathers' roles

and occupations, and therefore identify with a male role. Attempts must be made, she states, to increase the social well-being of families in order to promote healthy development of children. She proposes some community preventive measures, especially involvement of fathers in classroom discussions, and as leaders in sports and hobby activities, and provision of male support to children in fatherless homes, or homes where the father is frequently absent. She refers also to the potential usefulness of a self-help program called the "Spirit Movement," developed in Alaska and described by Mala (see below).

Mala (1984) states that in his observations in circumpolar regions, the Spirit Movement, developed by the Northwest Alaska Native Association, seems to be the most effective approach for alcoholism, suicide and mental health problems. Using Inupiat (an Alaskan Inuit group) values and arising from the community itself, the Movement "is a resurrection of basic human values which seem to have gone by the wayside in this period of transition" (333) and incorporates:

> a set of basic values for Native people that include sharing, caring for others, responsibility for self, knowledge of language and traditions, pride in one's heritage, respect for elders and an inclusion of them in daily life (*ibid.*).

He speaks generally of the changes in lifestyle, education, language and economy that have led to problems. For example, "Parents cannot relate to what their children are learning in school and a division begins to take place between an old way of life and a new one" (*ibid.*). He also provides examples of culturally relevant strategies that have proved effective: a 'spirit camp' for young people that teaches traditional hunting and fishing methods; Native healers working together with modern medical staff, using traditional healing methods "such as body manipulation, massage, hot springs, native herbs, and community support..." (*ibid.*). The emphasis is not on an "unrealistic 'going back' to an earlier time of

life" (*ibid.*) but on sustaining pride and traditional practices as sources of strength in the modern world. The Spirit Movement is thus:

> a way of providing health and social services to Native communities without alienating them or imposing non-traditional, threatening ways of treatment on them. It is by being aware of their historical roots and cultural differences and bringing the awareness into the type of medicine we practice (334).

Little else is described of helping practices, nor of how and why the non-traditional ways may be inappropriate or threatening. It seems to be assumed that modern process and methods are by their nature incompatible. This may in fact be true, and certainly this seems to have been the community's perception. People had turned to 'outsiders' – social workers, medical staff, etc. – whenever a problem arose, or felt that these outsiders imposed their practices. This had led to a feeling of loss of personal and community responsibility and control for solving problems. Social and personal problems had continued to increase. Mala says, so one can assume the methods used by such agencies were not working. But it is not demonstrated how the traditional and non-traditional fit or do not fit, nor why they were ineffective.

I was unsuccessful in tracking down current information about the Spirit Movement; I do not know, therefore, if it is an on-going program, nor can I comment on its activities or effectiveness today.

Callaway and Suedfeld (1995) describe and evaluate one community-based effort to reduce alcohol abuse and the problems experienced in a two-pronged approach involving restrictions on availability of alcohol and the development of a counselling and community education program staffed by two trained counsellors. Strategies were implemented for prevention, intervention and treatment.

Preventive strategies included community education through radio shows, an annual 'Awareness Week', school presentations, and the establishment of community bylaws and procedures regarding the acquisition and use of alcohol.

Intervention strategies included a women's group involving counsellor and peer-group support and discussion. Elders were invited to provide information about traditional methods of dealing with family issues. Referrals for counselling came through the Alcohol Committee, school counsellors, RCMP, etc. When appropriate, whole families were encouraged to take part in counselling.

Counsellors tended to deal with underlying causes of alcohol abuse (e.g., abuse and family violence); the alcohol abuse itself was generally not discussed unless clients themselves brought it up. Actual treatment occurred primarily at a detoxification/treatment centre in the then-territorial capital, a great distance from the community.

The impact of the educational and counselling services was perceived by the community as minimal. (Alcohol restrictions were seen as most effective.) Few people availed themselves of counselling services. Possible reasons presented by the community leaders and counsellors were cited, the last two perceived as most likely:

- embarrassment, especially when delivery of service changed from a drop-in centre to a shared location with Social Services. Counsellors felt that the former was an informal setting which promoted the development of necessary trust
- a general community reluctance to openly discuss alcohol problems
- possible community perception of the counselling as ineffective, perhaps because of the focus on general, rather than the alcohol, problems
- lack of client readiness to seek help

- lack of awareness of the existence of the counselling service: a survey showed that only 22% of community members were aware of its existence

Suggestions for more successful programming included the need for more aggressive outreach; increased community and political involvement and support; and local treatment facilities. In addition, though no mention is made of specific counselling strategies used or required, both community leaders and the counsellors themselves stressed the need for professional training in individual, family and group counselling, as well as in alcoholism-specific strategies, in order to improve the quality of counselling.

Kreutzmann (1995) presents the highlights of a study of child welfare out-of-home placements in Greenland. Rates of placement especially in certain parts of Greenland are high and indicate, she says, major problems in family systems. A conclusion relevant to the purpose of this thesis is that:

> parents express a great need to discuss their social and emotional problems and to understand the process used by professionals. Furthermore, there seems to be a contradiction between the parents' perception of the key problems and that of the "system" (73).

In other words, social workers must provide opportunities for parents to talk, must attend to their perceptions, must explain their roles and procedures and must involve parents in resolution.

A report (Stout and Kipling, 1999) to the federal government identifies health priorities of First Nations and Inuit children, who suffer much higher rates of morbidity, mortality, substandard quality of life and alienation. Though the report focuses on physical health problems, including high rates of Foetal Alcohol Syndrome/Effects, the authors stress that alienation, depression, and childhood sexual and physical abuse are also serious problems among teenagers.

They emphasize that though there are commonalities between First Nations and Inuit children's health and social problems, policy makers "cannot justify a homogeneous view of these two populations and the issues they face...*must not assume that one solution is applicable to both populations* [italics theirs]" (7). Although no details are given of content, Inuit-specific recommendations include: promotion of health and social service careers among Inuit; comprehensive family-focused services re parenting education and support, and family violence prevention; language, culture and inter-generational programs to build self-esteem; identification of "best practices which highlight the resiliency and coping skills of Inuit children and youth" (21); community-based suicide prevention and wellness initiatives; development of group and family-counselling services in communities; inclusion of core values of respect and tolerance in young people's sex education programs.

Inuit Conceptions of Health and Illness

Borre (1994) discusses the social and nutritional role of seal-hunting and consumption of seal meat as central to Inuit concepts of health. Although her study focuses on physical illness, it discusses the interrelatedness of Inuit concepts of soul and body, and the role of seal meat in maintaining the health of both. Depression, she says, is seen by Inuit as a weakness of the soul brought about because the body is not sufficiently warm and the soul cannot therefore be maintained. Seal meat is said to warm the body and thus strengthen the soul, preventing or easing depression. Hunting, the sharing of meat and the consumption of this 'country food' are also seen as activities and rituals necessary for social and individual health. She quotes an elder: "You have to be happy to be healthy and you can't be happy without country food" (9).

Fletcher and Kirmayer (1997), whose study is based in Nunavik (northern Quebec), discuss the role of spirit influence in illness, unusual behaviour and distress, and draw connections between traditional beliefs and the Pentecostal religious movement which they say increasingly attracts Inuit.

Traditional explanations of illness, physical and mental, were generally seen as the results of breaking of taboos, loss of the soul, or spirit possession either long-term or temporary, chronic or intermittent. Symptoms of possible spirit possession included 'not acting like himself', social withdrawal and isolation, not smiling, and not making eye contact. But persons exhibiting these symptoms might be simply troubled: their problem could be solved by talking it out. Possessed people, on the other hand, would not be able to talk out their problems, indeed would probably not even realize there was a problem. Hallucinations, very strange or bizarre behaviour, and sudden dramatic changes in voice tone or behaviour were perceived as strong evidence of spirit possession.

Some types of possession are based on Christian ideas of demon-possession; others have their roots in traditional beliefs. Some spirits, for example, can take over the body in moments of personal moral, physical or mental weakness. The guilt from a bad deed which has not been confessed, for example, would provide an opportunity for a spirit to enter. In such cases of moral weakness, people were essentially responsible for their own possession, and could also be responsible for healing it, by confession. In other cases, people might set up lives with spirits as companions or spouses, creating an intense conflict between their feelings and obligations to the real world and to the spirit life, and generally leading to withdrawal from real life.

Religious, medical, psychological and other experiences affect belief and interpretation, the authors say. Some now prefer modern explanations of distress and behaviour. But the traditional beliefs are reflected not only in individuals, they

suggest, but in the appeal of evangelical religious movements, with their constructs of spiritual healing and 'letting Jesus into your heart' as essential factors in social, family and individual well-being.

Suicide

In 1998, Kirmayer, Fletcher and Boothroyd discussed suicide, providing historical-ethnographic information about suicide in the past, citing current patterns and risk factors, and suggesting effective clinical and community interventions.

Much of the ethnographic literature speaks of suicide, although, the authors say, abandonment, murder, group-decided executions, assisted death, etc, are sometimes grouped under the umbrella of suicide; and there is disagreement about the frequency, causes, and rituals surrounding such death. Certainly, they state, some observers of Inuit society found suicide quite common, and virtually all record some instances. Old people who had become a burden were sometimes abandoned or killed, often (but not always) at their own request, or killed themselves. Grief at a loved one's death, illness or disability, difficult relationships, distressing life events, a wish to join a dead relative in the spirit world, social isolation, were all recorded reasons for suicide, assisted or self-completed. But the authors note that in the past, suicide occurred mainly among older people. With increased outside contact and social changes, suicide became more prevalent among younger healthy adults. Today, it is most common among youth.

The authors cite community initiatives such as the call-in Crisis Line, peer groups, and increased community attention and education, and the benefits of on-the-land programs that teach pride in traditions. But they emphasize the need for development of culturally sensitive mental health care that includes thorough

assessment and a range of treatment models. Most important are 1) counselling and socialization programs for young people, in which they can develop a strong sense of self and learn to share feelings and self-doubts; and 2) family therapy interventions, family health being perhaps the best preventive strategy. They state also that traditional values, such as non-interference, which lead to avoidance of problems must be rethought.

In 1998, Kirmayer and Boothroyd, with Hodgins, identified possible high-risk and protective factors regarding youth suicide in northern Quebec, and presented suggestions for prevention. Their statistics for completed suicide indicate that the general rate for young Inuit is about five times the Canadian average; in northern Quebec, the rate is twenty times higher than in Quebec generally. Both males and females have approximately the same rate of attempts (46% and 41% respectively).

The risk seems greatest when a psychiatric problem, severe illness, recent alcohol or substance abuse, and a number of life events in the last year are present. Solvent abuse especially increases the risk for young males, while alcohol abuse is more highly correlated with females. The authors note that solvents are more accessible than alcohol, solvent abuse begins earlier (age 12–13, versus 16–17 for alcohol), solvent use may indicate severe personal and family distress, and it may result in neuropsychological complications, which may be factors in suicide attempts. Regular church attendance seemed to be a protective factor.

They suggest that changes in values, and lifestyle expectations impossible to achieve, may result in frustration and difficulty being optimistic about the future, leading to an "impaired sense of self-continuity" (822). They thus recommend that preventive efforts focus on "interventions to reduce substance abuse, depression and dysphoria" (*ibid.*), as well as measures that emphasize coping skills and crisis intervention. Efforts should be founded in community-

based initiatives that stress individual and group continuity and esteem. No details are suggested, but the need for further research is noted, in order to identify effective interventions.

Kral, with Arnakaq, Ekho, Kunuk, Ootoova, Papatsie, and Taparti (1998) provides personal information from elders on suicide among Inuit. A strategy of helping emerges from these stories: the necessity of talk. Unless aired, problems become more debilitating. Many feel that with the cultural and language changes, communication has become more difficult, especially between generations, but "When you have a problem, don't be shy. Come forward. That's why you have the problem. It's the only way you can deal with it. It starts building up...If you have personal problems, start talking to someone before it builds up. If you don't, there are going to be more and more layers building up" (186).

Leenars, with Brown, Taparti, Anowak and Hill-Keddie (1999) discuss the similar historical culture changes related to colonialism and oppression of aboriginal peoples in the north and in Australia, as they relate to high suicide rates in both areas. The focus of healing and positive change must come, they say, from the communities themselves, with an emphasis on reviving traditional values and practices. The viewpoint is taken that "Western treatments are, in fact, one more attempt at cultural genocide" (357), although it is stated that "going back only to the old is not a solution either" (*ibid.*).

The juxtaposition of statements that indicate one must revive traditional practices rather than adopt genocidal Western methods on one hand, yet that those past practices are not necessarily the solution, is confusing. But the overall conclusion that communities must take ownership for solutions perhaps means that the Inuit community itself must decide which aspects of the old and the new they wish to utilize. No comparative data are included that demonstrate the differences between traditional and Western helping practices, or the inappropriateness of the

latter. Relevant to the purpose of this thesis, however, is a quote by an Inuit elder. Taparti, who states:

> We'll have to know more about the cultures of our ancestors, and try to follow them and try to help each other more. We can use many people's cultures, whether they may be the *qablunaat's*, the Dene's or even the Inuit's culture. If we can be more aware of people's cultures, I'm sure we would be able to come up with something that would be of benefit (355).

Ethnographic Research

Two contemporary ethnographers especially have explored the psychological and socialization aspects of traditional Inuit life, research that is of special relevance to this thesis.

Rasing's (1994) study of social order and nonconformity among the Inuit of the Iglulik area provides a comprehensive portrait of virtually all aspects of social organization and control, within both family unit and community group. He explores the beliefs and expectations related to 'coping with each other', including marital roles and relationships, community sharing practices, socially acceptable and unacceptable behaviour, intergenerational patterns, and resolution of conflict and emotional distress. He investigates also 'coping with the self' – that is, personality development and self-control. I have summarized those aspects that relate to values, attitudes and behaviours that have particular relevance to personal and interpersonal problems and their resolution.

The basic rules of group living, Rasing says, were: contributing to survival; sharing; openness; and minimizing interference. Cooperation and sharing were important attitudes in a subsistence hunting society, for men would either hunt together or make decisions about who was to hunt what, e.g.. some would go

inland for caribou, others by kayak for sea animals. Since success for each hunter could not be ensured, it would be necessary to share what meat was obtained. Rasing does explain that the sharing ethic could vary: meat was commonly shared by a hunter's extended family, but in times of want, other camp members, or visitors, were provided for as well. The advent of wooden whaleboats and trapping / trading of furs changed the nature of cooperation and sharing, and elements of status. Trapping, for example, could be done alone and thus required less cooperation. The furs harvested were generally the property of the trapper, who needed the money earned from pelts for the purchase of ammunition and equipment. Boats, expensive to obtain, also enhanced an owner's status: it was possible to obtain more meat, and others became more dependent on those who had boats. Camps in which family members could pursue different 'occupations' on their own (trapping, hunting, whaling) were able to increase their provisions and thus become more prosperous.

Sharing was a value, but this ethic was applied mainly to food. And though meat was usually shared because to withhold could threaten others' lives (and thus one's own, should one have been unsuccessful in the hunt), the animal was 'owned' by the one who killed it. Other items such as equipment also had an owner, but a piece of hunting equipment that was not being used was to be loaned to someone in need of it. Those wanting the tool were obliged to ask for it; taking something without the owner's awareness was considered theft.

Individual action and responsibility were both expected and necessary for survival, although cooperation and consultation with others was expected when necessary:

> Given the small margins of survival, all the men had to be given the freedom to do what seemed best in the particular circumstances he and his family found themselves in. Every

> hunter was (to be) free to go wherever he wanted, in spite of the fact that he often had to cooperate, and therefore consult…and that he was often given advice by the leader of his camp. A hunter needed freedom to act. It was the sole means to assert himself, and to survive (91).

The freedom to move about and make decisions for one's own family was also a way of handling conflict: "…one could move to another camp to avoid escalation" (184). This became a less viable option when permanent settlements became a way of life, and families between whom there was friction could not avoid each other as easily.

Because this freedom of individual action was necessary, interference in others' lives was frowned upon. Adults with normal mental capacities were expected to be able to formulate reasonable decisions and actions themselves. Even camp leaders, who were allowed to give direction because they were perceived to have above-average wisdom and skills based on experience, could be challenged, and were expected not to over-exercise their authority.

The need for individual action and non-interference thus conflicted with the need for interdependence, though both were necessary for survival. As well, conformity to taboos and rules was necessary in order to ensure some control over the availability of game. A rather simple solution for this paradox had developed: one *must be open* about one's thoughts, plans, actions and observations. "This made people conform to the norms and secured the safety of everyone. Openness was therefore obligatory, thus making the behaviour of others predictable" (92).

Open disclosure was also a major strategy for dealing with conflict. unhappiness, depression, worry, anxiety, guilt, etc. Repeatedly, Rasing's informants echo this individual's belief that were such thoughts and feelings to be kept inside, they could only escalate:

> When you have something on your mind, then let it out through words and you will feel much better about it. When two people are unhappy with each other in thought, and they don't do or say anything, then later on in the future these unhappy thoughts…will continue to haunt them…It has always been the rule that you express yourself. When a person does not express himself, he creates a problem of his own making. This person may be deeply troubled by his thoughts…people use to lose their minds…when they don't expose themselves (92).

Personality and self-control came about partly through naming practices, partly through observational learning and child-raising techniques. Children were believed to inherit some personality characteristics and behaviours of their namesakes; thus, for example, if the namesake had been a calm patient person, the child would be expected to be the same. As the child was at times treated as though they were in fact the namesake, characteristics and behaviours might be reinforced through comments that linked the child's behaviour to its namesake.

Learning to deal with others depended on the development of reason, comprised of thought, mind, senses, memory and will; and the maturation of reason depended on life experience. Rasing refers frequently to Briggs (1970, 1979a, 1979b, 1985, 1990) in his explanation of children's socialization and its effects. Young children learned independence, self-reliance and responsibility by having few restrictions in the camps, thus learning through experience the consequences of behaviour. They also had to learn that they could not always get their way, but must learn patience, self-restraint and the ability to cope with negative feelings. Parents taught children this by not responding to the child's demands or anger.

Citing Briggs' research, Rasing discusses emotional development and social development. Through a mix of affection and harmless aggression (squeezing, light slapping, frightening, etc., followed by hugs and smiles) parents

also taught young children that people could be both kind and unkind. The child would learn to respond to aggressive or otherwise threatening behaviour by trying to appease the aggressor, eliciting kindness again. Thus children learned, through the evocation of fear and confusion, that they should be considerate and circumspect, and that were others to behave aggressively or unkindly to them, they must not respond in kind. This learned sense of fear/appeasement ensured that the person would not impose himself on others, and would consider others' feelings and needs. In short, it ensured harmony.

As children became older and reason developed, indirect instruction, appeals to reason, scolding, criticism and even spanking became part of the socialization process. When reprimanded, verbally or physically, however, it was always necessary that the adult also explain why the child was rebuked and what s/he should do instead. This explanation was to be given after the child had finished crying or being angry, so that s/he would be in a state to listen and understand.

Too much open affection, it was believed, could lead to insufficient discipline, and a child who was therefore self-centred, uncaring about others. Loving too much could also be dangerous, for, as mentioned above, ones who loved could also hurt. Too little affection, on the other hand, created a sense of isolation and distress.

Inuit thus learned to control both negative and positive emotions in order to maintain harmony, reasonable behaviour, and non-interference. "An emphasis on rational behaviour, emotional inhibition and self-control were the best means to prevent interference" (115), which enabled group members to live with the maximum amount of autonomy combined with the necessary cooperation and consideration.

Because anger and frustration are inevitable, and because such feelings, pent up, could be dangerous both to the individual (escalation of feelings) and the group (aggression), specific methods had developed which allowed expression of disapproval or emotion. Gossip, public ridicule, derisive nicknames, and publicly-judged songs of derision were acceptable ways of making feelings and opinions known, and of shaming a person into acceptable behaviour. Competitive games and competitions were an outlet for rivalries.

Taboo-violations that affected animals and hunting were generally dealt with by a shaman, who was able to make camp members confess their transgressions. Once confessed, such violations no longer offended the animals or spirits, and the anxiety and guilt of the transgressor was eased.

Other unacceptable behaviours such as stealing or lying or overly abusive behaviour could be handled through counselling by the elders or camp leaders. This process involved showing care and concern for the non-conforming individual, pointing out the consequences of such behaviour and advising the person to stop. (Rasing notes that 'advising' meant 'asking'.) If the first counselling session did not bring about the desired result, more elders would get involved and more pressure was applied. Success "mainly depended on the leader's personality or authority" (122). Should the wrongdoer still refuse to change, social isolation was the only alternative: the person was simply ignored. The lack of social support and interaction was held to be the individual's own doing; he could change the group's behaviour towards him by changing his own behaviour.

Marital problems and tensions were also resolved by such counselling, though within the family group and generally with the emphasis on counselling the wife, for her insubordinate behaviour was more often seen as the cause of problems. For a marriage to work well, the man was expected to be a good

provider and to treat his wife well. But the main precondition of a wife's good treatment was that she obey her husband. If a wife challenged the man's behaviour or authority, he could use physical means to bring her into line. Such expectations, though 'cultural', were nevertheless not universal among individuals. For example, one informant explains that her husband never demanded anything of her nor told her how to behave, never beat her, and that when she became angry at him for some reason, he responded by laughing. She reminisces about what a good team they were, voluntarily supporting each other, and opines that good communication was the answer: "When couples didn't talk to each other I think the man would beat the woman..." (83).

Briggs (1970, 1979a, 1979b, 1985, 1990, 1995) has written extensively about psychological and emotional aspects of Canadian Inuit, especially as they relate to family relationships. *Never in Anger* (1970) is often cited (Rasing, *op. cit*; Schaefer and Metayer, 1974) as a definitive ethnographic work on traditional socialization of Inuit children, especially regarding emotional development. The main points, as they relate to the purpose of this thesis and to contemporary Inuit culture, are recapitulated in articles about family relationships and family conflict (1985, 1995).

Briggs discusses patterns of loving/caring, dependence/independence and family conflict as they developed in small-camp life (rarely more than 30 people, she says), and as they produce problems today. The two primary values on which behaviour was based were caring concern for others and reason. Both were signs of a mature person. Very young children, not yet having reason (which developed gradually) were tenderly cared for, all their needs and wishes fulfilled, and thus developed a very close dependent relationship with parents. This dependent love – different from the mature love/concern for others, which is learned – elicited

caring concern from parents, "reciprocal forms of attachment, the one seen as mature, the other as immature, and each eliciting the other" (1995: 26).

As children grew older, demonstrative affection was withdrawn, for as their reason developed, they were expected to know they were cared for without being told. Children also learned that in order to obtain caring concern themselves, they had to demonstrate it, had to consider and care for others' needs and wishes. (Learning generally was based on personal experience and observation rather on direction or authority, for children were expected to learn to use their minds, Briggs explains.) Parents also combined affectionate behaviour with 'playful' physical or emotional hurt; children then had to behave in ways that would re-establish affection. They thus learned both to fear others and to do things that would make others care for them again.

Love was also seen as dangerous, for if one lost a loved one, whether through death or abandonment, there was great pain. And parents who loved their children too much might overprotect, do too much for them, try to control their lives, etc. This too was a danger, for the child would not learn to be independent or sensitive to others. Thus parents sometimes treated their most-loved child the most harshly, both as a way of preparing themselves for possible future loss, and as a "treatment [that] was thought to strengthen children by teaching them not to rely on others for help" (1995: 26). The ideal was to care for others "universally, but moderately, circumspectly, and in proportion to their needs – not so much that it was painful to others or to oneself" (1995: 27). And dependent love was to be outgrown.

Thus one learned to understand and fear the power, whether hostile or loving, that others had over one's life; and also to understand that others' use of that power was largely determined by one's own behaviour. The result, Briggs

says, was a society in which people were strongly attached to family but not necessarily trusting of others, yet attentive to the needs of all. Even in families,

> Interpersonal trust exists but the quality of the relationship must be repeatedly tested and renewed…the possibility of abandonment lives not far below the surface in Inuit imaginations, so that the intensity of attachments often contains a strong element of dependent possessiveness (1985: 41).

Autonomous decision-making was expected and interference with others was frowned on; yet individuals were reluctant to express their own needs or wants because such behaviour might be seen as uncaring of others, and therefore lead to loss of caring behaviour from others. (Briggs speaks of "high performance but low visibility" [1995: 27]). Individuals were thus highly sensitive to criticism, fearing vulnerability and loss. Both the fear of loss and the fear of dependence on others produced "a belief that the strongest and therefore the safest is one who stands absolutely alone." (1985: 43).

Camp members therefore learned to be productively self-reliant and sensitive to others, both factors in a strong sense of self-worth. Yet, she says:

> the ambivalence about loving and doubt about whether one is loved, make people possessive of old relationships and at the same time reluctant to extend themselves to new ones. Consequently, loneliness and feelings of rejection are common problems among Inuit, even in relatively stable camps, and under modern conditions of individual, rather than group, mobility, these problems may be exacerbated (1985: 44).

Though Briggs stresses that no two families are alike, she describes common patterns arising from traditional life, which can prove to be destructive in modern life. Children are exposed to new ideas, goods, desires and patterns of behaviour. Parents, she says, in an effort to keep their children attached to them in

this poorly-understood new life, provide unrestricted material goods (within their limits) and make few demands, thus building obligations. Children are unable to meet the obligations to stay/help/respect, etc., nor do they learn to be independent. Parents, anxious and afraid, then get increasingly critical, alienating children even more. Children's self-esteem drops, for they can neither do nor provide, unable to do what parents want and unable to find a productive mature role for themselves. As well, though the traditional expectations were that individuals develop skills and the capacity for independent behaviour, these qualities were intended to contribute to the welfare of the extended family. Thus today, parents may expect children to stay close, earn money and develop skills, not for their own goals but for the benefit of the elders in the family. To move away, or to not buy the snowmobile wanted by the father, is seen as abandonment by the parents.

"So parents resent their children and feel badly about themselves as parents, while children resent their parents and feel badly about themselves as children. Both parents and children become more needy and less able to help on another" (1995: 32). Resolution is complicated further by an inability to talk to each other openly, based on traditional patterns of parent/child communication.

Briggs relates these problems of insecurity, possessive dependence, and fear of loss to high levels of suicide in the North. She explains also that for a society that valued independence, autonomy and personal control, the sudden changes wrought by an external power (i.e., the larger Canadian society and government), and the differences visible in material goods and influence between Inuit and outsiders, must inevitably lead to higher degrees of frustration, alienation and depression. Cultural differences that contribute to problems include:

- an Inuit dislike and fear of confrontation and argument, which might lead to an escalation of conflict

- the child-raising tradition that children must not be defended or protected in their own conflicts, for if they are defended, they will learn to expect to get their own way (as opposed to the North American 'teaching children to stand up for themselves')
- the emphasis on non-interference and tolerance of 'bad' behaviour
- the tendency not to express wishes or needs directly but rather through jokes or other indirect means
- the tendency to withdraw from and/or pacify aggressors

In order for this system to work effectively, it must be understood by the 'other' – and that may be difficult for non-Inuit.

She states, however, that as communities have become larger and more diverse, this pattern of interaction is not necessarily effective even among Inuit. As well, in modern communities, individuals have more opportunity to develop alternative supports and reference groups, so fear of loss and abandonment is not necessarily as stark.

She provides an interesting viewpoint of the value placed on sharing, and its place in both the old and new worlds. She speculates that sharing, though an ideal, was in fact always difficult for individuals to actually accomplish, the difficulty made manifest in jokes about stealing and killing for another's possessions, or in constant monitoring and discussion of others' sharing or hoarding behaviour. She argues that this knowledge of the difficulty was in itself a kind of self-monitor, keeping people aware of their possible selfishness and the social disapproval that would result were they to succumb. In modern life and larger communities, however, not-sharing is easier to justify and manage. As a result, family expectations of being given money or provided with material goods may be disappointed, leading to feelings of jealousy and mistreatment.

Briggs also discusses the communication and information problems that arise in the clash of cultures. Inuit had a learning style different from *qallunaat*: individuals were not 'taught' directly, nor were they (as children) to ask questions. Information was, rather, gathered by observation, and the 'truth' of information was based on personal experience and reasoning rather than on 'experts'. She states that, indeed, "The same skeptical attitude applies to advice solicited from knowledgeable Inuit: parents and grandparents" (1985: 50). Fact was fact when one had experienced it, when one had personal observable evidence. As well, concepts of 'policy' or 'organization' were unknown: an action or decision, even on behalf of others, was traditionally understood to be based on individual motivation and wishes. Thus, "Neither side really believes," Briggs writes, "that the other's thought processes are governed by Reason" (1985: 51).

She points out that there are Inuit who have fared well through the transition, whose own children are being raised with both nurture and direction, who are combining the old and new in constructive ways and informally counselling others in coping skills. She notes that many of the qualities produced in traditional Inuit socialization are appropriate to modern life:

> Inuit practices can provide excellent training in dealing with complex physical and interpersonal environments in that they stimulate curiosity, powers of observation and logical inductive reasoning, a realistic expectation that the environment is changeable, and alertness to the possibility of danger – all qualities which are as useful in a larger city as in an Inuit camp (1995: 40).

She sees hope in that "strategies are being developed for dealing with problems of relationship on both individual and community levels" (1995: 32).

Inuit Healing and Helping

Okalik (1997) interviewed Eva Lapage, an Inuk from Nunavik in northern Quebec, about healing circles she facilitates. Lapage's first experience was as an observer at a First Nations workshop in northern Ontario. On her return home, she realized the benefits and decided to form a healing circle in her own community. Initial community reaction was resistant, with people not understanding the purpose or process, but such circles are now frequent, she says.

It is crucial, she says, to talk about one's feelings in order to acquire a peaceful life, as "pains carried can be extremely heavy if kept to oneself much too long, locked up inside the heart with no one to confide in" (50). Her circles are available to all, white or Inuk, man or woman, people from any community, for she believes that everyone has similar problems, and release is necessary for all. She observes that *qallunaat* are often less open initially about their feelings, but once they open up "they are no different from Inuit" (53). Individuals must be ready to disclose, however; this cannot be forced but must be personal choice. She states also that elders she has spoken to say they traditionally confronted issues in similar ways.

She describes process in the circles:

- confidentiality is top priority
- open with a prayer
- a question like "What has hurt you in your life?" begins the session
- participants are given the opportunity to speak, but can choose to be silent
- participants can talk or cry as long as they need to, without interruption

- touch (e.g., a pat) is used as a sign of support for some, but awareness must be maintained of those who do not want to be touched
- participants know she (or others) can be approached for private help, but that choice is their own

Oakes and Riewe (1997), in their study of transformations in the economic foundations of Inuit society, note the role of community members as counsellors in the communities. Different elders are consulted for different types of problems, depending on their areas of expertise; other family or community members also provide voluntary counselling. Peer pressure on an individual to lead an improved life is seen as an effective strategy[3].

Arnakaq (1999) speaks of the benefits of healing circles, stating (without details) that although discussion, doctors, psychologists or psychiatrists can provide some benefits for emotional pain, it is best alleviated by an ongoing process of participation in a healing circle. (As noted above, healing circles have been adopted from First Nations' strategies, but a number of Inuit now find this process to be helpful in Arctic communities as well.) As an Inuk who facilitates such circles, she outlines common problems which can be resolved in such participation. I note these in full, to enable a better understanding of the problems that beset Inuit, from an Inuk's experience:

- being orphaned, or the least loved child
- molestation as a child
- rape victim
- deep emotional scars

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[3] Their anecdote about peer pressure in the not-so-distant past may be of interest: "In the 1970s a drunk was dressed up in caribou skin clothing, lashed to a *komatik* [long wooden sled on runners], taken out on the ice in the dark, and told not to move, they'd be back to pick him up tomorrow" (109).

- loss of a loved one
- malice at home
- infidelity
- murder of a loved one
- divorce, and its effects on children
- alcoholism
- violence
- living away from the place one most loves
- imprisonment, or the imprisonment of a loved one
- suicide-attempt survival
- residential school consequences

She notes also the possible consequences of such problems: abnormal behaviour; deep unhappiness; disruption of daily routines; sleep problems; self-care problems; isolation and indifference to others; self-hate; quick to anger; criticism of and cruelty to others.

She emphasizes that past traumas must be dealt with adequately, and this takes time. Attendance at healing circles must therefore be a long-term process, weekly meetings for at least a year. She lists the following as indicators of successful healing and finding one's true identity:

- being able to look after and nurture oneself
- ability to develop love, faith, friendships and strong bonds with others
- ability to have and share happiness
- living a good life and resisting temptation
- willingness to be visible
- willingness to learn
- not fooling oneself

- development of competence and self-confidence
- capability to work
- looking forward to the next day, and enjoying a day, a month, a year
- inner strength as well as acceptance of own weaknesses
- caring for the universe

Two short articles published in a northern newspaper reflect the growing community interest in learning effective helping skills. Canton (2000) writes of community initiatives to make counselling and self-help literature available and accessible. With a grant from the government, self-help and counselling books are being translated into Inuktitut. Sarah Killiktee, a community addictions counsellor guiding the translation project, is quoted as saying, "One book we translated was Choice Theory, which looks at parenting and ways to raise your children. We are very proud and happy that people in the community are healing because of the translations. They are telling me they have learned things they didn't know existed until they read them in translation."

Barrera (2000) writes of the Reality Therapy/Choice Theory training course provided by the Baffin Region Department of Health and Social Services for all counsellors in the communities. Graduates of the training say, "This program helps teach us all to be empowered, to move ahead no matter what happens" (Beverly Illauq), and "This program opens a lot of doors in counselling. It's going to have a big impact" (Anthony Qurunnut, through an interpreter).

Both articles indicate a community perception that there is a need for both training and materials related to helping, and that Inuit counsellors are finding southern/Western training and materials appropriate and effective.

Pauktuutit (1993b), the Inuit women's organization, has published a brief handbook of basic counselling skills (from professional counsellor-training

programs) that is intended to be a resource to anyone – friend, teacher, elder, family member – who wishes to be helpful in his or her community. In plain English and Inuktitut, the handbook describes and gives examples of how to use the skills – confidentiality, working together, listening well, empathy, paraphrasing, questioning, developing a trusting relationship, self-awareness, helping clients set goals – and warns against common behaviours such as taking sides, deciding what is best for the other person, and rescuing.

Pauktuutit also briefly points out that some traditional ways may not be helpful today, for example in situations of male/female conflict. An older Inuk, male or female, may have the attitude that a woman "is there for convenience, she is not worth much. If the counsellor really wants to help the woman, she will have to overstep practices and attitudes that were considered vital to a way of life" (16).

It is significant that Pauktuutit, a politically potent and respected organization committed to Inuit pride, health (at all levels) and achievement, perceives these professional strategies to be not only useful but necessary for effective helping in Inuit communities.

Minor (1983, 1992) has written specifically about appropriate counselling practice with Canadian Inuit, with references to Western counselling. Her research is most closely related to my particular purpose.

As a Northern social worker for several years, Minor perceived the need for culturally relevant practice and believed this was possible only if the helper had an in-depth understanding of the culture. She designed a research model to facilitate insight into a group's life, enabling subsequent development of strategies within the framework of the culture, and implemented the process with a working group of Inuit in order to identify relevant helping strategies.

The design involves three interwoven and interdependent levels of investigation which provide understanding of the culture and the individual's place in it. Level I examines elements that traditionally contributed to the physical survival of the group:

- relationship to nature
- environmental influences
- cosmology and mythology as sources of strength and models of action
- a belief system including rituals and taboos through which the group attempted to exercise control over their world

Level IIA investigates factors promoting psychological and social survival:

- family group, kinship, social organization, and structures of authority
- behavioural customs and norms, and their underlying value and moral bases
- mind, including thought patterns and concepts such as time
- communication, both verbal and non-verbal
- methods of cultural transmission (stories, dance, etc.)

Level IIB involves investigation of external intercultural influences on the group and on individuals. The final Level III examines the place of individual in the group:

- his/her value to the group
- the group's value in terms of fulfilment of individual needs
- development of identity and degree of individuality

This investigation, she states, can only be accomplished by the community. Citing Ivey's (1980) and Jackson's (1980) studies, however, Minor reminds us that "it cannot be assumed that all indigenous persons automatically possess cultural

expertise" (19), and that knowledgeable and influential members of the community must therefore be involved for both accuracy and political support. The role of the outside investigator can be only that of facilitator, the expertise only in providing guidance in analysis and identification of patterns.

Much of Minor's book explains her model, and describes the nature and development of Inuit culture generally, but she identified three factors that were, she believes, central to traditional helping practices. One is the ability to reason, defined as the ability to "comprehend and set facts in order so that some understanding may be had of a situation" (1992: 56). She states that the Inuit concept of reasoning is much more complex than the Western understanding of the term, "taking into account all skills, knowledge and social and environmental influences and relationships" (*ibid.*). Children do not have this reason, it is believed; it is a skill acquired gradually as a person develops into adulthood, and adults who do not think with reason are considered childish. Those adults who show evidence of having highly developed reasoning ability were respected and looked to for advice. The second factor is silent acceptance of that which cannot be changed, a realization one has come to through an assessment of circumstances. (Silence by others in times of grief or stress is also said to provide both psychological privacy and to indicate support; and silence, she says, was also expected of the one who was in pain, an inner working through of suffering without burdening the group.) The third concept is the seeking of advice from someone considered able to help. Helping, she says, involved the use of these three factors as well as empathic listening, ensuring understanding, directness, and the giving of advice.

Although Minor concludes that some Western counselling theories and strategies may fit into Inuit culture, little detail is given. She states that Rogerian concepts of empathy, respect and authenticity "are necessary in all helping roles"

(1992: 25), but seems to interpret the practices outlined above as being distinctive to Inuit helping. She observes that many youth and those who have a Western education have turned away from the advice of the elders, and states that eventually there will be only "modern Inuit...much influenced by the white" (88). She recommends that youth "begin to accept the advice, concerns and words of the older Inuit" (*ibid.*). She also concludes that Inuit themselves must develop their own helping approaches, based on whatever they choose to use, but asserts that these approaches would "most likely rely upon the traditional foundations of reason and silent acceptance, the ability to listen intently, and the ability to give advice and gain respect for that ability" (87); and that "Southern white attitudes and superiority complexes must indeed take second place to the profound traditional skills and approaches used by Inuit to survive..." (96).

I am perplexed, for silence is a therapeutic strategy; acceptance of what cannot be changed is a goal in both everyday life and in counselling; the concept of stages of reason and moral understanding (e.g., Piaget, 1958, 1965; Erikson, 1963; Kohlberg, in Clark, 1984) is an accepted tenet of both psychology and common belief; empathic listening, understanding, honesty and immediacy, and intervention ideas are basic elements in counselling; and seeking help from one who is seen to have the ability to be helpful is the very foundation of counselling.

I am unclear, too, about the properties, dimensions and uses of reason, silent acceptance and advice, whether they be counsellor/client qualities, strategies, interventions, advice to clients, and so on.

An immediate discomfort arises at the implication that these are the strategies that *should* be used *and* accepted by Inuit. Regarding the giving and following of advice, for example, the Inuit participants in the 1993 Mental Health Workshop (Pauktuutit, 1993a) stated that "directing people's lives by making decisions for them (telling them what to do, how to do it and so on) does not result

in positive change. It keeps them like they are…dependent, oppressed and relatively helpless" (16). It is generally considered unacceptable that a Western counsellor tell clients that they must see a specific counsellor, must use specific suggestions and interventions, or must accept certain values. The workshop participants seem to be saying that such individual choice and responsibility is a necessary positive force for Inuit as well.

Discussion

The literature review was written after the analysis. Although I knew from experience and from an overview of the literature that there was relatively little available regarding my purpose, and I had a general understanding of Inuit life from past reading and discussions, I wanted to be as uninfluenced as possible by others' conceptions of traditional Inuit worldview and values.

The literature has provided information and simultaneously raised questions. We have explored the types and manifestations and underlying causes of problems. However, concrete strategies for resolution are less in evidence. Many voices express the need for culturally appropriate practices, and Inuit voices express the need for more training, but little data is available regarding the specifics. The need for empirical research is clear.

A brief delineation of the historical events and hopes for the future that have motivated Inuit to consolidate the present with their past, will provide a richer context for this research.

The Eastern Arctic: Past Practice, Future Goals

The Canadian Eastern Arctic is an area of approximately 2 million square kilometres, with a total population of approximately 28,000 people, scattered in small far-flung communities; 85% are Inuit (Government of Nunavut Bureau of Statistics, 1999). On April 1, 1999, this area became a self-governing territory called Nunavut ('our land'), in which Inuit have the right to set up and adapt political, social and economic structures to fit with the life and goals of the population, whilst remaining within Canada (Indian and Northern Affairs Canada & Tungavik, 1993). A major commitment in the new government is to incorporate both the language and traditions into political, social and economic institutions. (GNWT, 1991; NIC, 1996; Department of Education, Culture, and Employment, 1996).

Social welfare services and counselling, too, must take into consideration both the past and the present in order to effect positive change in the future. As a culture in transition, Nunavut's social problems are many (Pauktuutit, 1993a, 1993b; Department of Health and Social Services, 1990; Irwin, 1988). Counselling services did not develop in the North in earnest until the 1960s; until then, social welfare functions such as distribution of family benefits payments and social assistance were administered by the Royal Canadian Mounted Police and Hudson`s Bay Company managers. (Tester, 1995; Diubaldo, 1985).[4]

Until the 1950s, Federal government policy in the Arctic had been one of 'benign neglect'. Inuit, as 'Canadians', made it possible for the government to maintain sovereignity over the north but little attention was paid otherwise. Diubaldo (1985), quoting extensively from government documents of the first half

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[4] The Hudson's Bay Company, British in origin, built its first permanent trading station on Hudson`s Bay in 1684. Their trading posts in the Arctic became the hubs around which settlements eventually developed (Newman, 1986, 1988).

of the century, describes the development of official policy towards the Inuit, which was radically different from the negative attitudes and 'protective' policies towards First Nations. Based on reports by RCMP, anthropologists and other non-Inuit who knew the North, Inuit were viewed as intelligent, resourceful and capable. Policy was thus geared to allowing the Inuit to live primarily as they wanted, with RCMP basically just enforcing basic laws regarding murder. Hudson's Bay traders, who were seen at times as exploitive of Inuit, were ordered not to encourage settlement around the trading posts. Education, when it was offered at the mission schools, was to emphasize skills that were necessary for self-sufficient survival; and financial aid was geared only to those in dire need, such as elders or the sick. The government thus, though technically viewing Inuit as Canadian citizens rather than as a special status group like First Nations, tried various schemes to "keep the native native despite the wholesale intrusion of the modern world" (110). That policy, which was, of course, also financially beneficial for the government, was to be changed: Inuit were no longer to be ignored. Following the directive of Prime Minister St. Laurent, the Department of Northern Affairs and National Resources, created in 1953, issued a statement of new policy:

> The objective of Government policy…is to give the Eskimos the same rights, privileges, opportunities, and responsibilities as all other Canadians…The task is to help him adjust his life and his thoughts to all that the encroachment of this new life must mean…The natural food sources of the Arctic are limited and the primitive Eskimo was a part of the balance of nature. As soon as we take measures to provide against starvation, to eradicate tuberculosis, to end infant exposure and the elimination of elderly dependants, and to improve health generally, we upset that balance…It is not enough to cure disease, the cause of disease must be removed and this is largely a matter of education and improvement of economic conditions…A new social order is supplanting the primitive life of the Eskimo…however, direction is given by the various white men on the scene…It seems obvious that an

> effort to place direction in the hands of the Eskimo is desirable...It will doubtless be necessary to proceed from trial to revision repeatedly...(Lesage, 1955, quoted in Diubaldo, 1985: 112).

Northern service officers were assigned around the north to implement and administer the new government policy of paternalistic involvement, resulting in "frenzied government activity, perhaps equally harmful [as the previous neglect], to redress the relative inattention" (Diubaldo, 1985: 52).

Illness was one of the reasons for change. Tester (1985) discusses the effects of the tuberculosis epidemic in the 1950s and 1960s, which necessitated the removal of thousands of patients to southern hospitals, where they often stayed for years. Children and adults in treatment forgot their language and skills, and on their return had great difficulty readapting to what was still a nomadic hunting society. In an effort to coordinate the return and readjustment of these patients, the government hired a handful of mostly-untrained social workers.

Crowe (1986), Diubaldo (1985) and Irwin (1988) describe the events (1950s to the mid-1960s) that created dramatic changes in Eastern Arctic Inuit life. The impact of a military presence (American and Canadian), a decline in fur prices, starvation because of changes in caribou migrations, distemper among the dogs and their resultant shooting by owners and RCMP, the inability of many to readjust to traditional life after return home from hospitals, and the push for formal education, culminated in the movement of many Inuit to settlements established around the trading posts and missions, where they became increasingly dependent on government welfare and housing services. General access to the outside world arrived in the 1970s with the advent of television.

From the late 1960s on, government policy was thus oriented to active integration of Inuit into modern Canadian society. Agencies and institutions such

as social services and education were established. The deliberate transformation of Inuit life, which missionaries had begun much earlier by insistence on changes in Inuit practices, was continued by the new liberals. Southern social workers and teachers often worked to transform Inuit into 'Canadians' through such measures as not allowing children in residential schools to speak Inuktitut. (Tester, 1995; Brody, 1991; Diubaldo, 1985; and personal communications with Inuit).

Although in hindsight, this can be seen as assimilatory and ethnocentric, it must be noted that the changes had some well-intentioned bases. In addition to the economic and health rationales mentioned above, these moves were also based on the liberal humanistic thought of the era, that all people are entitled to equal treatment and equal opportunity. Had Inuit continued to be left alone, the political argument now might be that they are discriminated against, disempowered, denied the choices and opportunities available to southern Canadians. Many formal and informal leaders in Nunavut today, for example, are products of the residential school system, and though oppressive practices are irrefutable, the education also had value. In an interview in *News North Nunavut* (McCluskey, 1999), for example, Rebecca Williams, an Inuit firmly committed to the concept of Inuit self-determination, who attended the residential school in Churchill, Manitoba, was assistant deputy minister of justice in the new Nunavut government and is currently a Member of the Legislative Assembly, speaks of the experience:

> I had a very positive and good start if I wanted to do something other than be a mother. We need to balance that all residential schools are not that terrible…we are just not speaking about it…People might think that was assimilation and it was assimilation to something else, but what I gained from it was that I learned other ways of doing things, other ways of living. I knew I was an Inuk but I was just learning something else. In time it did have an impact on me because I did not feel good about being Inuk. I think that had something to do with when we went there, everything we

had was replaced by something else. That didn't leave very much of me to feel good about…Now that I can think of the times past, I'm glad I went to school because I learned something I would never have known. That doesn't hurt me… Most of us were over the age of 12 and a lot of us were 16, 17 and 18 years old. When we went we had a very solid foundation from home. …If you were five years old, that would have been different (A9).

I have quoted Ms. Williams at length to emphasize that although opinions vary, only Inuit themselves can legitimately evaluate the effects of the introduction of these southern institutions and lifestyles, and decide what they want to keep, adopt, and adapt.

Inuit life inevitably changed, and as with any change, let alone such a dramatic one, new stresses, tensions and problems developed. By the late 1970s, with growing political awareness of aboriginal issues, the calls for community control of many services were urgent. Social problems were many, but no training programs were available, and social workers for the Department of Health and Social Services were generally hired from the south. In response to the logic that Inuit themselves, speaking the language and knowing the customs and needs of their communities, should be counselling their own people, and that training should not necessitate moving to southern Canada, Arctic College established a Northwest Territories-wide two-year human services program in 1982, in the western NWT. The campus was 2000 miles from the Eastern Arctic, in an area whose population is primarily Dene. Because Inuit students who attempted studies frequently dropped out due to homesickness and language and cultural differences, a similar program was initiated in the Eastern Arctic in 1987 (Bennett, 1986).

An understanding of the backgrounds of Inuit counsellors and the conditions under which they work, both of which are different from those of southern-Canadian urban practice, will illuminate the need for this research.

Counsellors and Counselling Practice in Nunavut

There is not a distinct difference between 'social work' and 'counselling' in the North. Social workers – though representatives of and beholden to the laws and policies of child welfare agencies, the justice system, social assistance, etc. – in fact spend much of their time in direct practice helping clients deal with alcohol abuse, domestic violence, effects of childhood sexual abuse, depression, grief, marital problems and so on. Those who are hired specifically as alcohol counsellors similarly deal with the whole range of client problems. There are no private practitioners *per se*, though some Southerners in private practice do specific contract work for the social service agencies and the government. Counselling is provided by overworked social agency workers, school counsellors, volunteers such as those operating the phone-in Crisis Line, religious leaders and church-affiliated members, and by individual elders, friends, and concerned community members.

Social problems in the North are many, including alcoholism, child sexual abuse, domestic violence, unemployment, and suicide (Department of Health and Social Services, 1998, 1990; Irwin, 1988). In one four-week period there were five suicides in my home community, which had at that time a population of about 4000. This is not unusual. The rate among Inuit is five to six times the national average, according to the 1995 Report of the Royal Commission on Aboriginal Peoples (Fletcher, 1998). Mental health and sexual abuse specialists are few, located in regional centres and visiting the outlying communities. Visiting psychiatric services are based in the south.

Irwin (1988) says that " 'not knowing' everyone is a very new experience for Inuit as they used to live in communities where they not only knew everyone but they also knew all their business" (13). That still often holds true. Dual relationships are unavoidable: clients will be neighbours, friends, and relatives. In

the smaller communities especially, many people may be related to each other, through blood, marriage or adoption. Clients are part of the daily life of counsellors, dropping in for visits, meeting in the local store, taking part in the same community activities. (This is true also for non-Inuit counsellors in the communities.). Confidentiality, a central value in counselling (British Association for Counselling, in Bond, 1998; Canadian Association of Social Workers, 1994), can thus be compromised: the counsellor may take the greatest care, but community members often know each other's lives and problems. Others may talk or ask questions about the client's situation when the counsellor is in a social situation; in such informal settings, one often responds automatically. As well, informal or untrained counsellors have not always been as aware of the need for confidentiality. People naturally talk, and in a small closed community, few things are hidden. Personal communications from students and friends have indicated that gossip is a common phenomenon, as it is, I suspect, in all human groups. Rouland (1976) states that gossip was an important form of social control in traditional society, though it was also discouraged (GNWT Department of Education, Culture and Employment, 1996), and Inuit have told me that decisions and behaviour can sometimes be complicated by a desire not to be gossiped about.

Counsellors may themselves have intense personal problems, or an involvement with a client (such as kinship, or personal conflicts) which would make it inappropriate to work with that client in a southern setting. Here there may be no choice: no one else may be available, or the alternative counsellor may be in a similar position. They also face every conceivable kind of problem, regardless of their expertise, and in small communities especially, referrals may not be possible. Counsellors are thus under great stress in trying to maintain an appropriate and ethical balance between their personal and professional lives, and in trying to be competent.

Because the institution of formal education is new, and the development of a full range of community schools even more recent, education levels are generally low (GNWT 1996; Diubaldo, 1985; Irwin, 1988). Milnes (1999) cites Department of Education figures which show that in 1990 only 60% of Inuit had access to a complete high school education in their home communities: the number that actually completed secondary school was minimal. 95% now have home-community access, but drop-out rates are still high. According to statistics compiled by the Human Services/Social Services program at Nunavut Arctic College, of 300-plus Inuit counsellor trainees in the program, 1987-1998, only a very few had completed secondary school. The majority had seven to ten years of formal education, and some in their forties and older had as little as three or four. Inuktitut was their first language, and for most it was the language of daily life at home and in the community. English verbal and comprehension levels thus varied. Though most had worked as counsellors prior to entering the program, or were currently working and attending school on a part-time basis, the differences in language levels and formal education had made it difficult to undertake self-learning about counselling: the literature is generally written at post-secondary levels of English. There is also, as mentioned above, no comprehensive body of knowledge about traditional helping techniques. Individual elders, if asked, will tell what they know or use, but such information is piecemeal and unstructured.

Those who work as community social workers, under the auspices of the Department of Health and Social Services, receive in-service training in child welfare, legal processes, sexual abuse counselling, and the like. Community alcohol counsellors, however, had until quite recently been hired by the Hamlet Councils, and usually had no previous training. The position was filled by whoever was willing to do it. The government did eventually provide training funds specifically for alcohol counsellors, but this funding ran out after a few years. Today, alcohol/drug counsellors are generally under the umbrella of Health and

Social Services, and are provided in-service training. The Department has also recently begun to provide Reality Therapy training, through the Glasser Institute. to their counsellors and social workers.

The College last offered a School-Community Counsellor program in the mid 1990s, funded by the Department of Education, but this has not been repeated.

The concept of 'community wellness' is now the driving force behind efforts to solve personal and social problems. Communities will take on the primary responsibility for developing and managing services that are appropriate to their specific conditions, with professionals, Inuit organizations such as the Nunavut Social Development Council, and community members working together to find suitable strategies and interventions (GNWT Department of Health and Social Services, 1995; Pauktuutit, 1993a). And the Nunavut government's vision of healthy communities specifies the provision of options and opportunities for building individual, family and community strength, with decisions made on a well-informed base of traditional and modern knowledge (Government of Nunavut Bathurst Mandate, no date: website link "Healthy Communities").

Chapter 3: Research Methodology

Introduction

My initial intent was to develop a model of counselling appropriate to Inuit, formulated from an investigation of traditional helping methods. Tension arose, however. A study of traditional helping process might be interesting as an ethnographic study, but would it be *useful* in real work with clients? The community call is for synthesis of old and new, for effective helping. Were I to begin with the hypothesis that *only* traditional methods would be appropriate, I might in fact be neglectful of or blind to other helpful data. I might also fall into the trap of stereotyping – I am aware that needs are not static within an individual, nor identical among a group. But were I to begin with the premise that traditional helping methods were compatible with conventional Western counselling, I might again overlook data that did not fit with that hypothesis. And Inuit themselves had made it clear they wished to understand both the old ways and the new (Government of Nunavut Bathurst Mandate, no date: website link "Healthy Communities").

The most useful resolution of the tension seemed to be to investigate both Western and traditional helping strategies, to first *find out* the content of each, and *then* form hypotheses of potential usefulness from a comparison of data. Additional research questions developed during the course of the study.

Research Design

An extensive review of literature from many sources and an analysis of hundreds of pages of interview transcripts did not appear to lend themselves to

quantitative analyses, which in any case disconnects data from context and meaning (Guba and Lincoln, 1994). My intent was not to measure or quantify elements of counselling. I wished to paint rich portraits in context which could then be compared to each other in order to discover relationships, patterns and processes.

My aim was not the constructivist one of active involvement in reshaping understanding and perception (Guba and Lincoln, 1994). (Nor could it be, given that most of my sources were texts – books, articles, transcripts.) Neither was it the evaluative, transformative goal of critical theory (*ibid.*). The research project necessitated a methodology set in the postpositivist paradigm of objective inquiry, comparison, and explanation of multiple realities, with the ultimate aim of producing useful and plausible hypotheses (*ibid.*).

The goal was to produce generalizations through comparison of voices within and between groups, to explore these multiple perspectives "to see *if* they fit, *how* they might fit, and how they *might not* fit" (Strauss and Corbin, 1994: 279), with the ultimate practical intent of providing a framework of knowledge within which Northern counsellors can predict ("Knowing what I know/understand of this client at this point, what might be the most appropriate …") and control ("…in order that I may manage my actions so as to be most helpful regarding the needs of this client").

Grounded theory (Glaser and Strauss, 1967; Strauss and Corbin, 1990, 1994, 1998) is deemed by Morse (1994) as the methodology most suited to a multilevel, multispeaker comparative investigation in which "the question concerns an experience [being helped] and the phenomenon in question is a process [what is done that is helpful]" (223). Generalizations would be founded on data that had withstood the process of falsification inherent in such multiple comparisons (Guba and Lincoln, 1994). Grounded-theory specifications of

immersion in the data, close attention to words and meaning. levels of categorization and coding, identification of relationships, attention to patterns and processes, comparison, questioning, and thoughtful efforts at insight seemed not only appropriate but essential to my investigation. My intent was not simply to determine what each speaker says, but to "conceptualize how the substantive codes may relate to each other as hypotheses to be integrated into a theory" (Strauss and Corbin, 1994: 277).

My counselling experience was also appropriate to grounded theory, which encourages "theoretical sensitivity…professional knowledge, as well as both research and personal experience, that the researcher brings to his or her inquiry" (Strauss and Corbin, 1994: 280).

Strauss and Corbin state that grounded theorists:

> have obligations to contribute to the knowledge of their respective disciplines and professions…[and] to the actors we have studied…Its usefulness can be a matter of "understanding" as well as of direct application (1994: 281).

My ultimate purpose in investigating effective counselling with Inuit clients is to provide potentially useful information to the community in which I live. The desire to know what was done in the past and to know how modern methods can be useful in the present/future has been stated by the community (Government of Nunavut Bathurst Mandate, no date; Nutarak, 1999). The government's year-end report of community alcohol and drug counselling initiatives describes the success of Reality Therapy training and Nunavut Arctic College counselling courses:

> This Report is about the action that regional alcohol and drug workers and Social Workers took to improve local health and wellness. Their participation demonstrated the huge potential and interest to develop skills, learn new treatment methods and techniques and create a healthy

> community. This is a priority for the Minister of Health and Social Services and all Inuit people (Government of Nunavut Department of Health and Social Services, no date: iii).

My hope is that having learned from my informants. I will have interpreted and organized that information in ways which will contribute to both understanding and practical use.

The needs of the project correspond to my personal bent. Aware of the subjective nature of personal reality, the inevitable presence of the researcher in any inquiry and the potential difficulties of maintaining value-free research, I nevertheless believe in the importance of trying to maintain objectivity. I believe that accurate conceptualization of a phenomenon is not possible from one perspective, but requires attention to many, as the researcher listens in an effort to identify common patterns. I also believe there are realities which can be empirically evaluated as to, at least, plausibility/implausibility. And I believe that accurate notions of similarities, differences and fit can come only from grounded comparison.

Strauss and Corbin (*ibid.*) emphasize "that *multiple perspectives* must be systematically sought during the research inquiry," the voices of many actors incorporated into interpretations, conceptualizations and emerging theory. My initial intent had required the elders' perspectives and that of contemporary Western counselling. I had also considered that investigation of younger informants might be useful. Grounded theory left the door open for additional sampling.

Ethnography colours my research. Atkinson and Hammersley (1994) describe ethnography as a social research method that relies to varying extents on participant observation and has most or all of the following features:

- a strong emphasis on exploring the nature of particular social phenomena rather than setting out to test hypotheses about them
- a tendency to work primarily with "unstructured" data, that is, data that have not been coded at the point of data collection in terms of a closed set of analytic categories
- investigation of a small number of cases, perhaps just one case, in detail
- analysis of data that involves explicit interpretation of the meanings and functions of human actions, the product of which mainly takes the form of verbal descriptions and explanations, with quantification and statistical analysis playing a subordinate role at most (248).

My purpose and research incorporates these four features. And as a non-native resident in a predominantly Inuit territory, I am a natural participant observer in a 'foreign' culture. My understanding and interpretation of meaning will thus be influenced – conceivably, enriched – by the continual exposure to Inuit opinions, perceptions, and explanations. Fourteen years of instruction with several hundred Inuit students from different communities, each of whom has had individual goals, values, perceptions, and ideas, has allowed a deep immersion in the exploration of counselling and human behaviour and beliefs, with Inuit. This intensive involvement had provided some insights and information about helping, and generated questions. Indeed, the impetus for this study comes from that participant observer role.

Phenomenological method (Holstein and Gubrium, 1994) also plays an influential role in the analysis of informants' statements. As the elders' interviews themselves were not directed towards counselling *per se*, my investigation and interpretation proceeded initially from explanations of how various aspects of life and the world are experienced and interpreted by each elder, rather than how counselling/helping is experienced and interpreted. From those explanations and descriptions, I would search for data relevant to my specific area of interest. At all

stages of the analysis, understanding and interpreting those explanations of 'how life is' and then 'how helping is' (what Holstein and Gruber refer to as "the experiential world every person *takes for granted*" [263]) would depend on attention to the subjective reality of each elder – attending to each story from that particular point of view and in that context, rather than attempting to fit that reality into a structure of my own. I *bracketed* (*ibid.*) what emerged from the interviews and literature, attempting always to suspend judgments and opinions based on my experiential world. Thus, for example, I viewed elders' discussions of rape and unwanted sexual intercourse from the point of view of the speakers, retaining statements in the context of that life rather than in the context of my own, or contemporary attitudes. As well, I attempted to suspend my own knowledge and experience of contemporary counselling requirements and process. Inevitably, I recognized similarities, differences and relationships, but strove to lay aside such observations and questions until such time as comparison was appropriate – " 'bracket off' these ideas so that they do not interfere with the job of assigning concepts to the data" (McLeod, 1994: 94). Similarly, in the investigation of Western counselling, I attempted to suspend my personal preferences, opinions and orientations. Only by doing so could I hope to make interpretations that might be considered valid.

Attention to this subjective reality of individual clients is a major principle of therapeutic approaches, and thus is particularly relevant in research about counselling. This phenomenological foundation especially informs the client-centred counselling which has been my preferred style of practice over three decades, so the approach is virtually automatic in my work. It was therefore neither unfamiliar nor particularly difficult in this research.

The Comparisons of Group Findings

It seemed beneficial to have visible the similarities and differences between Western counselling and traditional perceptions. As the inquiry expanded, this seemed necessary also for the comparison of conventional and multicultural counselling, and contemporary Inuit conceptions. Although the similarities and differences are obvious in the detailed narratives, for clarity those findings are presented in tables of point-by-point comparison, a technique more common in quantitative method, but congruent with the postpositivist paradigm in which grounded theory methodology is set (Guba and Lincoln, 1994). Glaser and Strauss themselves state:

> *In many instances, both forms of data are necessary* – not quantitative used to test qualitative, but both used as supplements, as mutual verification and, most important for us, as different forms of data on the same subject, which, when compared, will each generate theory (1967: 18).

The Researcher's Personal Side of the Fence

It is necessary to clarify that I come to this research with preconceptions and opinions. My academic background and personal interests are in the fields of sociology, psychology (both individual and social) and social/cultural anthropology. Forty years of reading, observation, experience and experiments had inevitably resulted in opinions and conclusions.

There are undeniable differences among groups in behaviours, beliefs and rationales. But I believe that these differences are basically ones of form…that underlying the diversity are deeper and more important common features. I fall in with those theorists and scholars who maintain the existence of a behavioural/cognitive/affective human nature which is universal – the belief that we all feel and think and structure life in the same essential ways, and have the

same basic needs – though the manifest forms of conduct, and the rationales underlying that conduct, may vary. I am also attentive to the research which demonstrates that similar basic personality characteristics are evident in a wide variety of cultures (Digman, 1990; Buss, 1991). My beliefs have been bolstered by the ongoing neuroscientific and other biological research which increasingly supports this concept of a universal human nature and the notion of all human psychology as biologically grounded though environmentally shaped. As Fukuyama states:

> There is, however, an increasing body of evidence coming out of the life sciences that the standard social science model is inadequate: instead, human beings apparently are born with pre-existing cognitive structures and age-specific capabilities for learning that lead them naturally into society. There is, in other words, such a thing as human nature. For the sociologists and anthropologists, the existence of human nature means that cultural relativism needs to be rethought and that it is possible to discern cultural and moral universals that, if used judiciously, might be used to evaluate particular cultural practices. Moreover, human behaviour is not nearly as plastic and therefore manipulable as their disciplines have assumed for much of this century (1999: 155).

I also have been wary of stereotyping groups of people, for my experience and reading has led to the conviction that the variations in behaviours and beliefs of individuals within a group are as great as the variations between groups. As well, discussions, experiments and observations have indicated that generalized statements about 'This is how they are' or 'This is how we are' are frequently not borne out. I believe that conclusions of similarity and difference can only arise from an empirical comparative study.

Lastly, I have the sense that contemporary multicultural theory and culture-centredness are charged with politicized emotion, not only within cultural groups

themselves (understandable in peoples struggling to have a voice) but in political and academic adherents. Fox (1997), an anthropologist himself, says the cultural-relativist position was initially "essentially a humanitarian attempt to oppose the view of 'natives' as 'savages' and to plead for a deeper understanding of customs that appeared at first, to the 'ethnocentric' observer, as cruel or disgusting" (336). But, he continues, this humanistic position, extended and expanded to various groups and movements seeking empowerment, has become a view that is not to be questioned or challenged. "What was a shift in emphasis in the social sciences has become a revolutionary, relativistic, antiscientific political ideology…that threatens those who don't accept the moral absolute of the cultural relativists" (337).

I believe such a position clouds reason and observation, and can invalidate conclusions. Psychotherapist Petrushka Clark, in a lecture at the University of Durham on May 5,1999, referred to the pitfalls of what she called *schoolism*: "a passionate conviction that one is right, against all evidence and facts." I do not wish this research to be based on schoolism, on a forced fit into a specific school of thought regardless of the information my informants present. I therefore entered into this study with the determination that I would maintain an unemotional, empirical open mind.

I consider myself aware of and attentive to cultural differences and had explored the literature on multicultural counselling. I had a fair grounding in the literature of North American aboriginal counselling. I have also always been of the view that if a client perceived some aspect of his culture or ethnicity (or religion, or sexual orientation, or…) to be a distinctive or problematic issue, my counsellor persona must accept that viewpoint and work within that framework, whatever my private, personal perception. A client-centred integrative and eclectic approach seemed to have served me well, and seemed to be regarded as appropriate by my

students and those I had counselled over the years. But because I was comfortable with that model, it was possible that I had remained unaware of or ignored valuable aspects of a culture-centred approach.

Regardless of my belief in a universal human nature, and my awareness of possible stereotyping, I understand that differences of convention inform our lives as social beings. Our behaviour is prescribed and proscribed to varying extents by the group, and the average individual generally behaves in forms and styles that fall within the range of acceptable. (Beliefs are more difficult to evaluate: How can one truly tell what another believes? Beliefs too are prescribed and proscribed, but knowledge of them comes only from what people do and say, and statement and behaviour are not necessarily indicators of actual belief. It is also possible to *assume* an individual believes a thing simply because that is the stated group belief and because she does not openly disagree.) It was possible that in my scrutiny of Inuit helping, I would find that those diverse prescriptions and proscriptions would necessitate adjustments in my approach and practice. And multicultural strategies, were I to examine them more closely, might provide resources compatible with whatever arose from the investigation of Inuit.

In this research, I was therefore determined to *listen well*.

Counselling: The Western Voices

A literature review is generally an illumination of the background from which the research arises, "the platform from which further research can be carried out" (McLeod, 1999: 69). Strauss and Corbin (1994), however, suggest that documents of any kind can be sources of data, and for the purposes of this research, counselling texts are my Western voices.

Data sources and Collection

Glaser and Strauss state that data collection begins with only a general subject area, for data collection is controlled by the emerging theory; but the researcher "may begin…with a partial framework of local concepts, designating a few principal or gross features of the structure and processes…"(1967: 45). My general subject of inquiry was: What is counselling said to 'look like' by contemporary practitioners and researchers? I began by surveying some current general texts on counselling. However, an immediate data need emerged: it was necessary to focus on conceptions of *effective* counselling. The initial sampling was therefore theoretical, for it seemed best that the Western voices meet two general criteria:

- they specify and discuss the elements of effective counselling
- the information be current – that is, produced in the last dozen years or so and currently in use, for perceptions of effective counselling may have changed over the years

The process for choosing specific informants within this framework was a pragmatic one. I included informants whose texts I used in my own teaching, and which I knew were also used in other counsellor education programs. I acquired others suggested in professional catalogues of current counsellor education material. I attended to names that were suggested or referred to in discussions with my research supervisor. I visited the bookstore and bought copies of relevant texts currently on their shelves. I visited the library and noted the training texts.

I ultimately listened to seventeen voices, a mixture of British and North American. Although I reached theoretical saturation well before, this process was new and exciting to me; I just kept going.

The grounded theory analysis demanded inclusion of other voices. The reasons for, route, and process of this theoretical sampling, leading to primary theorists, multicultural counselling and historical elements, are outlined in the description of process.

Process

Conventional Counselling

One author at a time, using sticky-notes on book pages, I first did a rudimentary classification, using general terms such as 'relationship' and 'goals' in identifying the basic meaning of units of data, a process grounded theory calls *open coding*. This initial coding was eased by the fact that the texts were training literature and were already therefore structured.

Huberman and Miles (1994) stress the importance of "data display…an organized, compressed assembly of information…as a basis for thinking about its meanings" (429). For me, the most useful tools for such reflection are expanses of wall and index cards/written notes, and I used such wall charts throughout this investigation. I returned for closer scrutiny and analysis of meaning, copying meaning units (Rennie, Phillips and Quartaro, 1988) to index cards with which I set up a wall chart to help me track and organize concepts, properties and themes. The name of the writer relevant to the data was included on the index card. The data units were classified into descriptive categories such as 'building trust', 'asking questions' and 'counsellor self-awareness' (category titles also on index cards, changed as necessary). If data fit into more than one category, they were included in each.

This axial coding became more complex than the open coding, as I looked for relationships, properties and dimensions, based on my interpretation of the data. Comparison of data within each speaker and between informants produced new categories, relationships and thus levels of sub-categories. Units of analysis were again assigned to more than one category when relationships became evident: 'empathy', for example, was a property of 'building a relationship', 'information-gathering', 'counsellor characteristics' 'goal-setting' and 'choosing interventions'.

Evident in this analysis were also ideas of behaviours that were seen as unacceptable. Such concepts became part of the emerging patterns: for example, in relationship-building, informants specified that the counsellor not moralize, minimize client concerns or feelings, or blame.

Whenever an author advocated a specific concept already coded – and the author's meaning and properties of the concept coincided with those previously elicited – I added his or her name to the relevant index card in the appropriate category. All data were eventually classified in four major constructed categories: Counsellor Characteristics, Relationship, Understanding of Problem, and Action, with properties classified in more than one category if relevant.

During this process of theoretical coding (Strauss and Corbin, 1994), I made memos to myself about such things as what was said about the meanings, properties and dimensions of a concept, or the conditions of its use, what such data analysis revealed to me, and how it might fit into emerging theory. Thus, for example, it became clear that confrontation, used and expressed appropriately, can be a relationship-building skill (indicating attention, understanding and concern) as well as an impetus for movement, insight or goal-setting; but also, that confrontation was not an essential in the picture of effective counselling. These memos helped organize my final coding and write-up

Patterns became evident; a process was emerging. When categories were saturated – when no significant new data, categories or relationships appeared – I considered the axial coding finished.

Through a process of *selective coding*, all the counsellor characteristics, behaviours, skills and strategies considered essential to successful counselling by all authors were identified, producing a *core category* which I named simply 'essentials'. Some categories, such as confrontation and challenge, turned out not to be considered essential: there were varying emphases on and opinions about their usefulness. These were thus *negative instances* (Strauss and Corbin, 1990) – instances that did not fit into the core category of 'essentials'. Nevertheless, they seemed an important part of the portrait, variables that might be appropriate at certain times depending on the needs of the client.

A model of effective counselling, whose essential elements of process, values, counsellor characteristics, behaviours, skills and strategies are agreed upon by all, was evident.

How had this model developed? It became clear that in order to have as accurate a picture as possible of what is meant by 'effective Western counselling,' it was necessary that I acquire an in-depth understanding of the theoretical foundations. I needed to examine the primary theorists whose concepts and strategies have been adopted, adapted, expanded upon, modified and perhaps discarded. Were these ideas of effective counselling based on past theories or were they relatively new developments which were distinctly different from the ideas of the primary theorists? 'Traditional counselling' and 'conventional counselling' are often used interchangably. Are they in fact the same or different?

Being human, we are all victims of our uniquely personal perceptions, biases, goals, needs and wants. "A person's knowledge of the world consists

entirely of private events" (Wolpe, 1982: 19). In reading or listening, we therefore inevitably view what is said or written through the lenses of our own interpretations, values, and worldviews. As in the interpersonal communication skills exercise 'passing on a rumour' (Adler and Towne, 1996), what is heard/read gets reinterpreted: things are omitted, glossed over, changed, added, focused on, and forgotten. In time, through dozens or hundreds of such reinterpretations, the original is perhaps fundamentally changed. Concepts in the original, having been forgotten, may be presented by others as completely new or revolutionary, perhaps in fact offered as significant contrasts to what is believed to be the original.

Sampling was again theoretical. "The emerging theory points to the next steps…guided by emerging gaps in [the] theory and by research questions suggested by previous answers" (Glaser and Strauss, 1967: 47). I returned to the texts I had been reading, and others that focused on theory, and made notes as to the theorists who are perceived by the authors as seminal influences. From among the theorists that were discussed, I chose to concentrate on Adler, Bandura, Beck, Berne, Ellis, Glasser, Harris, Lazarus, May, Perls, Rogers, and Wolpe, for they seemed representative of the varied schools of thought. I briefly discuss Freud, whose influence was of course fundamental in the development of psychotherapy: but my reading had seemed to indicate that the theorists who broke away from a strictly Freudian model, or who developed completely different views of cause/effect/intervention, were the ones who most influenced the development of counselling (versus psychoanalysis) as we know it today.

I first read what secondary sources said about the primary theorists and the theories. But I then acquired copies of the theorists' original texts, for it seemed essential, for the reasons mentioned above, that I read their own words rather than only interpretations and explanations made by others.

I used the same category framework that had emerged from the first study, as I was still investigating effective counselling and these theorists were the foundations. Each primary theorist was in fact a new data source for the investigation, an integral part of the theoretical sampling procedure. Structure and categories could be added as necessary. I was seeking to understand their perceptions of effective counselling and if/how those perceptions fit into the model that had emerged. I could then identify roots, if they were present, from which the elements of effective contemporary counselling had grown.

I again coded and categorized, adding their names and supporting quotes if it became evident that a concept on the wall was a component of a theorist's view of effective counselling. I noted also disagreements, such as degree of directiveness.

The most labour-intensive – and fascinating – aspect of this section of research was memoing, as connections, insights, questions, relationships and surprises emerged. For example, Rogers' understanding of and strong emphasis on the importance of the individual's place within a larger social context is not an aspect much attended to in discussions and evaluations of Rogerian counselling. In fact, client-centred counselling is often said *not* to take social context and external factors into consideration (Laungani, 1997; Sue and Sue, 1990; Corey, Corey and Callanan, 1993; Pedersen and Ivey, 1993), so this was a revelation to me. Similarly, Adler's prototypes of Brief Therapy's 'miracle question' were a delightful find.

I was now led down another path of research and theoretical sampling. Knowledge and use of an intervention strategy – a method that will supposedly help to bring about change – is a basic counsellor requirement. One skill and strategy component of the model which had emerged was the ability to provide 'diverse interventions'. To best understand counselling, and to unearth information

that would be useful in the later comparison of Western and Inuit strategies, it seemed necessary to examine the interventions of the primary theorists as bases for the variations that exist today.

All counselling interventions fall generally into one of three basic categories (affective, behavioural, and cognitive, although with inevitable overlaps and combinations), and in the interests of thesis length I decided that two examples of each category would suffice for my purposes. Rogers was to me an obvious choice because of his overwhelming influence in the development of counselling. Wolpe was a seminal figure in behavioural theory. Bandura added an important perspective to behavioural learning theory. My choice of the other theorists was influenced by subjective factors: Adler was developing theory and practice before Perls, for example, so was, I thought, a 'deeper root' – and I am not personally interested in using Gestalt therapy; I have read more of Ellis than Beck, and Beck's concepts seem closer to Ellis` whereas Berne presents a cognitive orientation from a different angle.

This aspect of research and data presentation entailed a straightforward summary description of basic rationales and techniques, gleaned from my coding and memoing regarding each theorist, re-reading them as well as secondary sources.

Finally, I needed to understand the path counselling had taken from 'there' to 'here'. I returned to the readings with which I had begun my search for an understanding of counselling, this time looking for historical knowledge. Following those authors' reference leads to other source materials, I made notes about the contributions of research and newer theories, as well as the rationales underlying concepts. My goal now was to construct a basic historical 'map' of the development of counselling from its roots to the contemporary process model that had emerged, with explanations for directions taken.

During the process of research, it had occurred to me that another data source was necessary to the inquiry. What did the multicultural approach offer to this investigation? What were the differences in values, strategies and interventions, which might be relevant?

Multicultural Counselling

Again, I began my investigation by reading the texts on counselling, in order to acquire a general sense of the concepts, rationales and precepts of multicultural counselling.

For further understanding, I investigated the foundations from which notions of multicultural counselling arose, reading both primary and secondary sources for data about theories of culture and human nature. I then focused on texts regarding cross-cultural and multicultural counselling.

I wished first to construct a historical map tracing paths and directions. I identified and memoed the concepts and properties of emic and etic approaches, and the rationales of each, which had influenced conceptions of counselling from the cross-cultural views of the 1970s, with emphasis on differences, to the current multicultural form with its synthesis of universality and difference.

Once more using wall charts, I then scrutinized the process and content of effective multicultural counselling, analysing data from informants who spoke specifically about multicultural competencies: Sue and Sue, 1990; Pedersen, 1997; Pedersen and Ivey, 1993; Ivey, Ivey and Simek-Morgan, 1997; Paniagua, 1994; Leigh, 1998; Vacc, De Vaney and Wittmer, 1995; Sodowsky, Taffe, Gutkin and Wise, 1994. I began again with the same category labels that had emerged in the investigation of conventional counselling. Multicultural counselling is nevertheless counselling, and as my essential purpose was the same – to construct a picture of

effective counselling – I felt it was acceptable to initiate the research using that framework. New concepts and categories could emerge and be incorporated into the structure, categories could be collapsed or structured in new ways, irrelevant existing ones removed. I then coded, categorized, and compared the data. Some new categories did emerge, such as 'cultural knowledge' and a sub-category 'racism and oppression', which were classified under, for example, the higher-level categories of both 'counsellor characteristics' and 'information-gathering'. I memoed regarding relationships, conflicts, questions and insights. When the final selective coding subsumed into the core category of 'essentials', the result was a visible model of effective contemporary multicultural counselling, with apparent consensus among authors. Memoing was again the key procedure in identifying themes and patterns, noting speculations, and providing the source of ideas potentially useful in comprehension of the data.

I followed through with an examination of a question that had emerged and aroused my interest during my reading and memoing. Concrete examples are often used in the literature to illustrate concepts and requirements, and to contrast conventional counselling and multicultural counselling. I had noted such examples with some bemusement, so I returned to the texts, chose samples from various authors, and examined the explanations that had been rendered. I then compared these explanations with the requirements of effective conventional counselling.

The elements of effective multicultural counselling had been identified. The research needs then necessitated the comparison of this model with that of conventional counselling, in order to identify strategies more appropriate than those of generic counselling. For clarity, I tabled the elements of each in a point-by-point comparison.

It was now necessary to listen to the elders.

The Elders' Interviews

The investigation of Western voices provided a framework for the examination of Inuit practices. I had identified the values and components of effective Western counselling. That data provided a starting point for progressive focusing on the elements of Inuit helping; it set up filters for assessing theoretically relevant extracts in the wide-ranging Inuit discourses. Western generic counselling is based on a phenomenological humanistic philosophical foundation. What was the Inuit worldview from which helping strategies arose? Counselling is a process. What shape did that process take in traditional helping? Were there similar conceptual categories, and if so, what their properties? Were there different or additional elements and properties (e.g., spiritual or shamanistic)? What was seen as essential; what was variable?

I chose to use transcripts of recent interviews with elders from many communities as my source of data, rather than secondary sources such as anthropological studies. My reasons for this strategy are twofold. Firstly, the information will be current rather than being based on studies done in the past, for change in Inuit society has happened so quickly that practices and attitudes common even ten years ago may not be relevant today (Pauktuutit, 1993b). The elders, too, are active in their communities, participating in meetings, information sessions, conferences, workshops, community development and the like. They are thus constantly exposed to and exchanging a variety of ideas, opinions and knowledge. It is important that I, the researcher, not make decisions about what is or is not traditional or what has or has not been influenced by social change and contemporary knowledge. What matters is what the elders themselves say. Secondly, my conclusions will thus be based on primary sources rather than being interpretations of others' interpretations. Alexina Kublu (1996), an Inuit educator

and participant/translator in these interviews, speaks of the problems that frequently arise when *qallunaat* (non-Inuit) researchers write about the Inuit:

> The problem with many theses is that the authors have perceived ideas which they then try to document with proof. The information provided by an informant is often adjusted to support the argument. From first hand experience I can state that I have known of an informant being asked the same question numerous times until out of exasperation she would say, "Yes, that is the way it is." when in the beginning she started off saying that she did not think that was the case. Another situation I have come across is being told that we (my classmates and I) were mistaken because our instructor had studied under Balikci and Balikci had said something different …These perceptions are often different from those shared by Inuit (1-2).

Data Source and Collection

My source is once again documents – transcripts of interviews designed and conducted by ethnographic researchers for the purpose of acquiring knowledge about specific domains of traditional Inuit life. The interviews are currently being published in English and Inuktitut by Nunavut Arctic College, in a series of books on the themes of life stories, law, health practices, cosmology, child-raising, and perspectives on Christianity. Although counselling was not specifically one of those domains, in reading through the transcripts (my role was to help edit the English translations in preparation for publication), I realized how much information was contained about Inuit helping traditions and foundations. Copies of the original transcripts were given to me by Dr. Susan Sammons, head of Nunavut Arctic College's Inuit Language and Culture department, under whose auspices the interviews were conducted.

My theoretical sampling involved all the transcripts, all the elders, for information was so scattered that even when no new data seemed to be emerging. it was possible that new information would appear perhaps several interviews later.

Data was obtained from six sets of semi-structured interviews, consisting of a number of sessions per set, which had been conducted with small groups of participants. Each set had been structured around one of the themes, but both interviewers and interviewees in fact spoke about many other things of interest that were brought to mind during these informal sessions.

Seventeen elders (seven men, 10 women) were interviewed at Nunavut Arctic College in small groups (generally pairs) in 1997-1999. All are recognized and respected as traditionally-knowledgeable elders. The interviews were conducted by Inuit students in the Inuit Language and Culture department, with the objective of learning interview and recording skills while gathering the traditional knowledge that is fast disappearing. Tutorial help and supervision were provided by Inuit Studies researchers from universities in Canada, The Netherlands and France, each with his/her specific theme of interest.

Interviews were in Inuktitut, and tapes were transcribed and translated into English by the students and Inuit staff.[5] To ensure the validity of translations, Inuktitut transcripts were first closely checked against the audiotapes and

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[5] The elders who gave of their time were: Elisapee Ootoova; Herve Paniaq; Saullu Nakasuk; Naqi Ekho; Pauloosie Angmaalik; Emile Imaruittuq; Lucassie Nutaraaluk; Akisu and Aalasi Joamie; Mariano Aupilaarjuk; Marie Tulimaaq; Uqsuralik Ottokie; Tirisi Ijjangiaq; Tipuula Attagutsiaq; Victor Tungilik; Rachel Uyarasuk; and Jaikku Pitseolak. The student interviewers were: Aaju Peter; Susan Enuaraq; Myna Ishulutuk; Eena Alivaktuq; Nancy Kisa; Bernice Kootoo; Jeannie Shaimaiyuk; Julia Shaimaiyuk; Mathieu Boki, Johnny Kopak; Kim Kangok; and Vera Arnatsiaq. Researchers involved in the project were: Alexina Kublu (Nunavut Arctic College); Dr. Jaarich Oosten (Leiden); Dr. Michelle Therrien (National Institute of Oriental Languages and Civilisations, Paris); Bernard Saladin d'Anglure (Laval University); Dr. Frederic Laugrand (Laval University); Wim Rasing (Nijmegen); Dr. Jean Briggs (Memorial University, Newfoundland); Stephane Kolb (Laval University). Translations were provided by Alexina Kublu, Sally Mikijuk, Maaki Kakkik, Ooleepika Ikkidluak, Nina Manning-Toonoo and Archie Angnakak.

corrections made. English translations were then compared word by word to the Inuktitut transcripts and corrected.

Although the interviews had been semi-structured for the purposes of those researchers and students, they were in fact completely *unstructured* in terms of my purpose. It was as though I had been eavesdropping on discussions of varied topics that had no intended relevance to my area of interest. I asked no questions and therefore did not affect the content or direction of the discussions in any way. This open approach has the advantage of bringing forth a wide range of information and reflects the phenomenological approach (Bryman, 1996; Denzin and Lincoln, 1998) on which counselling is also founded: understanding the subjective reality of individuals.

The transcripts are therefore in many ways a far richer and more candid source of knowledge about values, worldviews, beliefs and practices than interviews, questionnaires or research instruments structured specifically towards eliciting information about counselling. Perceptions, ideas and beliefs about problems and helping thus fit into the whole fabric of life, rather than being influenced by the researcher's direction or constrained by pressures such as providing an immediate answer to a specific question. (Denzin and Lincoln, 1994).

The number of informants, both male and female, from a variety of communities, also enabled differences and contradictions to emerge and be discussed, for life and perceptions were not identical for all Inuit even in the past. As Pauktuutit (1991) reminds us, Inuit culture "varies from region to region, community to community and even from Inuk to Inuk" (4). This multiplicity of realities is essential for the development of plausible generalizations (Strauss and Corbin, 1990).

Process

As mentioned earlier, I did have speculations about the possible results of my investigation, based on my life and experience in a predominantly Inuit society. But I did not know what I would actually discover. I did not commence with a theory, and did not wish to do so.

In grounded theory, conceptual categories are to emerge from appropriate coding of the data. However, when the researcher begins the investigation s/he has a general idea of purpose and therefore selects participants and prepares interviews relevant to the phenomenon under investigation (Strauss and Corbin, 1990). These interviews, however, had not been designed with counselling as the phenomenon under investigation. It was necessary that I collect data from information that had been gathered for other purposes, and I therefore needed to impose a thematic framework after the fact, which would enable me to identify and distinguish starting points for this data collection, and help me understand what I found.

I considered using the same categorical framework that had emerged from my examination of effective Western counselling, with the Inuit elders as new sources of data. However, I might therefore be forcing the Inuit data to fit within that structure. Themes, patterns and processes that emerged from the Inuit data might be substantially different and should therefore be allowed to surface in their own shape.

The literature on counselling makes clear that any conception of helping theory and practice, in any society, is founded on notions of worldview, perceptions of the nature of human beings and their social interaction, expectations of behaviour, beliefs about cause and effect, etc. Strategies that correspond to these beliefs and perceptions then develop (Gilmore, 1980).

Gilmore had developed a theoretical framework of levels of knowledge in the development of an intervention system: philosophical bases (metaphysical. epistemological, ethical), concepts of human nature and behaviour. and interventions that are informed by those concepts and beliefs. This seemed a clearly-defined structure for organizing the initial collection of data, which would then lead to the elements of grounded theory as specified by Glaser and Strauss (1967: 42): category (effective counselling); properties of the category; and hypotheses. Gilmore's structure would also help me better understand and trace the roots of the process and strategies that emerged.

I began by reading through all the interviews, trying simply to get an overview of the whole. I then began a rough open coding of each interview session: I labelled each statement or group of statements that seemed to express something about philosophical underpinnings, human nature and behaviour, or helping. These sections containing potentially relevant data became the units to be analysed.

I made copies of the interviews, for I would be cutting apart at least one set, and began the process of meaning-analysis and open coding. I made notes on the transcript as to apparent thematic content of each unit. I analysed what important points or meanings, related to helping and its foundations were evinced in statements, memoing questions, observations and ideas for future consideration/comparison/etc. The following quote from Aupilaarjuk, as he explains different types of rules, illustrates this process:

Table 2
Example of open coding

1. There was a *piqujaq* that the sewing of all caribou clothing had to be completed before we migrated from inland to the sea; only repairs could be done once we reached the sea. 2. Why did they do this? They did not want to break the *piqujaq* because they did not want to go through hardships while they were out seal hunting. 3. Some *tirigusuusiit* were similar to the *qallunaat* ways of doing things. *Qallunaat* are not happy if things are not done on time according to their schedules, following their watches. Inuit were like that too. 4. If they didn't get things done on time, they weren't happy about it either.	*Themes* 1, 2,3,4. Time orientation 1,2,3,4. Planning 1,3,4. Rules, norms, expectations 3, 4. Intercultural similarities 2,4. Behaviour: reasons and consequences 2. Practicality 2, 3-4. Thought and reason

The first two statements tell me that in this aspect of his life there was planning for the future, with present behaviour (proper clothing preparation) based on expected or future behaviour (hunting) and anticipated possible consequences (hardship if clothes were not appropriate). (Memo: How important was planning in other kinds of situations?)

There were rules and expectations for behaviour. (Memo: The reason for this rule seems to be based on an awareness of something important being needed in the future. In this case, that 'something important' meant means of survival (proper clothes). Watch other such explanations…what kind of situations necessitated rules? What were the rationales for other rules?)

I also understood from this situation that the behaviour here was oriented to the future. The last statement also indicates a future orientation: in order to have a notion of something being done 'on time' or not, one must have anticipated in the past what needed to be done for the future and when that future would occur. (Memo: Interesting in that I seem to remember that often statements about

traditional aboriginal cultures say they are not future-oriented. See what else emerges about this.)

The statement of intercultural similarity is specific, concrete and overt; but its additional meaning to me is that Aupilaarjuk perceives and analyzes both similarities and differences between people and concepts. (Memo: Universals? Do we all do similar things for similar reasons? My personal orientation – be aware. but maybe here too? Other statements? Future research?)

The idea that this behaviour is oriented to practical needs seems evident: one needs appropriate clothes for one cannot prepare these clothes while hunting (my *a priori* understanding of 'why nots': weather factors; supplies and sewers – the women – in camp, time limits, etc.); without appropriate clothes, one will run into hardship – cold, wet, possibly death.

Finally, all the statements reveal behaviour shaped by thought, analysis and reason, both by Aupilaarjuk and by the people from whom he has learned. (Memo: How significant generally?)

Having analysed and interpreted the statements for meaning, I then decided the dominant meaning(s) of the unit: What is the main thing this unit tells me? In this case, the descriptive summary, written in the margin, was "Behaviour 'why': think of future need/consequence". This seemed to include everything important. I then cut out this meaning unit and prepared a folder with the descriptive category heading ('behaviour - reasons', in this case) and filed the meaning unit. However, I also annotated a second copy for inclusion in another category of 'thought and reason', for that seemed an important underlying principle.

Thus I processed each interview, ensuring that the speaker's name/interview theme was on the extract. As analysis of meaning units produced

new concepts, I labelled new folders. If a statement/group of statements was primarily related to a category already identified, the extract was filed there. If a unit presented more than one important meaning, I cut a copy from another set. wrote the appropriate descriptive summary on each, and filed each in appropriate category folders.

Elders' statements were compared in two ways. First internally: that is, the statements of an elder were compared to his/her words in other discussions. We all contradict ourselves at times. It was quite possible that an elder might indicate something in one discussion that was contradicted elsewhere. I thus compared statements about similar concepts to determine what seemed to be the primary point of view or meaning or predominant pattern. For example, in one instance an informant might have said that his parents taught him a skill through demonstration and discussion, yet in other instances he would emphasize that learning came through observation rather than direct instruction. In all such cases, the latter was said to be generally true. Each elder's words were also compared to others, in order to determine common themes.

I emphasize again that I was not trying to describe all aspects of traditional Inuit culture as a whole, but focused only on such data as seemed relevant to an understanding of helping foundations, concepts and process. Thus, for example, there was much information about marriage and roles of men and women, but my interest in this research was not to describe how marriages came about or the details of gender roles. I concentrated on trying to understand what the data told me about human nature and, for example, sources of problems within marriage, from a traditional Inuit viewpoint.

I noted properties and dimensions of concepts. For example, in cases of counselling for unacceptable social behaviour, confrontation was used. This

confrontion was to be sensitive, kind and caring – but less so/more strict if subsequent counselling sessions were necessary.

When the interviews had been cut up, analysed, filed and no new data or categories emerged, I culled the extracts in each file, to provide a more manageable data base. If there were many similar meaning units from an informant, I chose representative statements which were clear examples of meaning. There were, for example, numerous and repeated variations of "I know this is true because I have experienced it myself."

At this point, I set up a wall chart, using index cards labelled with the category names that had emerged. This would give me a visual overview that was easier to work with than numerous file folders piled on the floor, just as grouping the meaning units in folders was easier than managing loose scraps of paper.

I made comparisons and looked for relationships between concepts, constructing new categories on index cards and subsuming or deleting others. For example, categories on 'shamanism' and a subcategory of 'helper spirits' had emerged from the initial open coding, and provided much interesting data regarding group life and the nature of individuals, which was coded into other categories. I had speculated that such spiritual elements might prove to be significant, for the literature on aboriginal counselling often emphasizes this.

But these specific categories were eventually deleted, although they were extremely important elements of Inuit life. Shamans had been of primary importance in solving problems such as lack of game and illness. However, it was clear from these interviews that shamans were not a central part of helping with personal or interpersonal problems – and in fact were sometimes deliberately avoided. And although the elders explain that shamans had personal spirits which protected them and helped them achieve their particular ends, including the

divination of people who had broken taboos and thus caused problems for the group, no elder mentioned shamanic spirit help as an element of or strategy in counselling. The *qilaniq* ritual for determining causes of illness or depression is described in the analysis, but this was not necessarily dependent on the shaman or spirit help, but rather on a person's knowledge of the process: "Not only *angakkuit* [shamans] performed *qilaniq*. Anyone could do it…It is a procedure to find out answers to problems facing the community" (Aupilaarjuk, Cosmology: 74-75).

Ordinary individuals, too, could have a helper spirit, although one was not always aware of what one's spirit was. (Personal communication from Alexina Kublu: The spirit could be anything: a scrap of paper, a rock, a berry. Recognition of one's spirit might come simply through realization that one had a special interest in, for example, stones of a certain shape. Some people never come to recognition of their helper spirits.) But nowhere in these interviews do these elders talk of such personal spirits as a source of resolution for personal problems.

Christianity is a central guiding principle to the elders, and many speak of the importance of God, prayer and the Bible in their lives. And certainly, ministers and church lay-members have done, and continue to do, pastoral counselling. Such spiritual elements were and are important aspects of Inuit life generally, but they appear not to have been an essential in counselling. They seem to be, rather, a more personal source of guidance and comfort, or a helping method used by some within the 'essential' framework. Thus they too may be classed as negative instances, a strategy which may be important to some individuals in some cases and thus becomes a helper/helpee variable but not an essential or common factor.

Concepts that had emerged under the primary categories of philosophical, human nature and behaviour, and helping had been classified into as many sub-categories as seemed appropriate when relationships became evident.

Throughout this process, I memoed extensively: questions, relationships, insights, and connections regarding helping, as well as areas for possible future research. Themes and patterns emerged: pragmatism; a phenomenological but empirical view of reality and the acquisition of knowledge; the central role of thought, reason, and analysis of consequences; the importance of communication – expression of feeling, explanation, listening – in change; and much more. I memoed on loose-leaf paper, filing each memo into a binder in three broad categories (worldview, behaviour, helping), cross referencing and duplicating when necessary.

The phenomenon under investigation was the content and process of counselling. From those memos and categories therefore emerged a final core category of Essential Elements of Counselling, which encompassed three constructed primary groupings: Values, Counselling Relationship, and Strategies. The results reflect the common patterns and processes which emerged from the comparisons.

During the process of this inquiry, further research about the perceptions of younger Inuit indeed became necessary. Just as needs, beliefs and perceptions are not identical between individuals, neither are they static across generations. This is, I believe, especially important to remember in a society where change from one generation to the next has been fast and dramatic, and in which the vast majority are less than fifty years old (GN Bureau of Statistics, 1999). The above investigation examined the elders' perceptions of effective counselling. I could not assume that a younger generation had the same views. Neither could I assume they did not.

The Interviews with Younger Inuit

Data Source and Collection

Glaser and Strauss (1967) emphasize that:

> The basic criterion governing the selection of comparison groups for discovering theory is their *theoretical relevance* for furthering the development of emerging categories. The researcher chooses any groups that will help generate, to the fullest extent, as many properties of the categories as possible, and that will help relate categories to each other and to their properties (49).

My choice of younger Inuit was thus determined by my purpose, determining concepts of effective counselling with Inuit. This theoretical sampling necessitated choosing informants who had experience of counselling and whose voices could thus be compared to the findings already generated. It also seemed necessary that though more acculturated and therefore more likely to provide different and varied data, they nevertheless have knowledge of traditional practices, in order that their information could more effectively be related to the purpose of investigating cultural appropriateness.

I therefore chose informants in the 30s to 40s age group, with the rationale that they are the generation that straddles both cultures. It is their parents who still lived the traditional life, they who as children grew up in many of the old ways, they the first generation also having full access to the new world. They are thus in a position to choose from both worlds, and it is they and their children who will both make use of services and determine future directions.

All identify strongly with their Inuit background and believe in the importance of maintaining what is good from that tradition. That too is relevant to

my purpose and to credibility: Inuit who are completely assimilated, I thought, might be less likely to be able to contribute to concepts of Inuit appropriateness.

Although all but one are currently Iqaluit-based, they have roots and family connections in other communities, so variations in background are accounted for (keeping in mind the comments expressed by varied voices above, that not all Inuit behave/believe the same way, that there are variations dependent on area or family.) Three have current experience as counsellors and have completed a variety of training programs. One had some experience and a basic counselling skills course a decade ago. Their counselling work has been primarily or exclusively with Inuit clients. Although the focus of the interviews was their personal perceptions of effective and distancing helper behaviours and qualities, it was my belief that their experience in the other chair, as counsellors with Inuit clients, would contribute to especially valuable opinions and perceptions.

My strategy for finding informants was to approach people who I knew had had relevant experiences, explain the purpose of my research, and ask them if they were willing to contribute their ideas to the study. Two (B and D) had been my students ten years previously, but I judged that sufficient time had elapsed and experience intervened (including other more-recent training experiences for both) that an instructor-student relationship would no longer be a factor. I think it is evident from the interview transcripts that both spoke from their own perspectives.

I began with four informants, all women, for there are many more women who have experience of counselling. It occurred to me, however, that males might contribute other perceptions, and I thus extended my search. The male interview, however, provided no significantly different data when the comparison was completed. Saturation seemed to have been reached and it thus did not seem necessary to include other informants, although several others had agreed to contribute.

Interviews were grounded in a semi-/unstructured format for which a series of open questions (Strauss and Corbin. 1990; Miller and Crabtree. 1994) relevant to my purpose had been prepared as a starting point (see Appendix 2). The interview purpose was written up on the consent form (see Appendix 1). as well as explained in person prior to and at the start of the interview. I also gave examples of the types of questions I would ask, but explained that the actual direction of the interviews would be determined by their responses, discussion, and questions. As a result of this open-ended format, each interview is different in content and length. although there are common questions of specific interest to my purpose.

Four interviews were audiotaped and transcribed, then analyzed. One respondent lives in another community several hundred miles away, and the intent had been to do a personal interview when the informant was in town on business. Travel plans were, however, cancelled, and the interview was thus done by e-mail. The consent form was faxed, and I then e-mailed one or two questions at a time, formulated from my initial outline or based on the responses received.

Janesick (1994) states that choice of interview site must be selected according to some rationale. I felt that the choice of site and time was best decided by the informants, according to their comfort and availability: three chose their offices, one was interviewed at her home. To the e-mail informant, I stressed that I had no deadline to meet: responses could be sent when ready.

Process

In the interests of validity, I wished to provide copies of my interpretations to each informant, in order that they could assess the accuracy of my interpretations. I therefore first analysed each interview transcript separately. in effect developing a model of effective counselling for each informant, grounded in

the information provided by the respondent. I read each interview, first open-coding by using margin notes to identify general categories such as 'emotion', 'advice', and 'counsellor quality'. Concepts, quotes, relevant memo notes or tentative interpretations were then written on index cards, each card titled with a category name (and the respondent's name, for later reference in comparisons). Data were then axially coded – shuffled, grouped, subsumed under other categories when relationships became apparent. 'Relationship-building', for example, came to include counsellor qualities such as 'niceness' and 'non-judgmental' as well as 'trust', which itself subsumed 'confidentiality', 'understanding' and 'competence'. Some data were included in more than one category: 'understanding', for example, was a relationship-building/trust factor as well as a strategy. The core category of 'effective counselling' included the subcategories of 'counsellor and relationship', 'strategies', 'unhelpful / unacceptable', and 'unimportant'. I then wrote up a narrative description of effective counselling for that respondent.

Each analysis and narrative was completed before I moved on to do the next interview. A full analysis of the first interviews "gives guidance to the next…interviews" (Strauss and Corbin, 1990: 30), but also important to me was that I stay as centred as possible on each individual respondent, for full understanding, until comparison was appropriate. The style of each story is thus somewhat different, for time passed between each, and I did not refer to already-completed narratives when embarking on a new one.

As each story was completed, however, obvious patterns began to be evident. When all interviews had been written up, I printed off copies and began the comparison, also revisiting memos and index cards compiled for each informant's analysis. Again using the categories of counsellor/relationship, strategies, unhelpful/unacceptable, and unimportant, I coded for qualities and behaviours in each category that had been mentioned as significant by all five

informants. I sorted the remaining data as 'differences' and 'variations', re-categorizing a 'variation' piece of data as a common feature if all had mentioned it but with different properties or dimensions, and memoing regarding the different views. For example, 'expression of emotion' was seen by all as inevitable, generally beneficial and to be allowed, with the common significant qualifier that the client must be able to choose the timing of such expression. But respondents expressed varied opinions regarding the importance of attention to emotions.

A significant difference is exemplified by 'self-disclosure': Personal counsellor disclosure was a necessary component of both relationship and strategy for most, but one informant drew a line between professional and personal, specifying the latter as inappropriate. Although developing understanding was an essential counsellor strategy for all, self-disclosure thus became a variable rather than an essential requirement in that category. This negative instance (Strauss and Corbin, 1990; Seale, 1999) was incorporated as an important part of the theory: Certain generally-acceptable counsellor strategies must be used with care and awareness of the individual client's preferences and perceptions.

Similarly, counsellor ethnicity was not important to any of the informants. One might then conclude that ethnicity and culture may be dismissed as a factor. However, each informant mentioned that this might be an important factor for some clients, especially involving language use or perceptions of being understood. This negative instance thus is also crucial to the theory; it too becomes a variable that is dependent on the individual client's perceptions and needs, and which must be taken into account by the counsellor.

From this analysis, I was able to generate a core category of counselling essentials, and from this core category, to formulate a representation of effective counselling for this group of informants.

Having completed this analysis, no new directions or informants seemed necessary for the purposes of the research. Gaps had been filled and theoretical saturation achieved. Similarities and differences between Western counselling and Inuit-relevant strategies could be assessed.

Chapter 4: The Western Voices

Conventional Counselling: Theory and Strategies

The purpose of this section of the research is to investigate the theories on which contemporary conventional counselling is founded, in order to ascertain what in fact was formulated by the pioneering theorists, as well as to examine the contemporary models of counselling that have developed from those roots.

My investigation of Western counselling, therefore, attempts to obtain a clear picture of the values and practices of counselling from its beginnings, so that my conclusions will be based on 'what is' rather than on 'what is said to be'. With that knowledge, I shall then be able to adequately compare and contrast the principles of modern Western practice with those of both traditional and contemporary Inuit.

The theoretical foundations of counselling, as distinct from psychoanalysis, will be traced from their most significant beginnings in the work of Carl Rogers (1942, 1998) to models of current practice.

The qualities and strategies of effective conventional counselling are investigated first. Subsequently, the conceptual bases and strategies of multicultural counselling are examined. The conventional approach and multicultural counselling will then be compared in order to identify specific strategies that may be appropriate/inappropriate for use with culturally-different clients.

The Development of Counselling

The path to current models of counselling spans seventy-plus years, and it is not possible within the limits of this study to make a comprehensive examination of all the theories and events that have had an impact on the profession. It will nevertheless be helpful to trace the major influences that have shaped present practice.

Counselling has evolved from diverse roots, including pastoral helping, turn-of -the-century psychological theories of Wundt, James, and Watson, the growth of social welfare 'friend' services in the mid 1800s, and, more significantly, the development of vocational and educational counselling programs. It was Freud's psychoanalytical theories, however, that laid the foundation for modern conceptions of psychotherapy (Feltham, 1997; McLeod, 1998; Belkin, 1988).

Freud (1962, 1973, 1976, 1977) saw human behaviour in deterministic terms, as the result of unconscious motives and the instinctive drives of pleasure (sexual and other) or *life instinct*, and aggression/destructiveness (*death instincts*). Personality, he believed, was an interrelated system of three components: the *id*, whose drive is to satisfy instinctual needs for pleasure; the *ego* which mediates between external reality and the instincts of the id; and the *superego*, which internalizes the moral and value system of the individual's society. Problems arise when the three ego states are not in balance, and for Freud, the imbalance, the struggle for dominance, was waged in the unconscious and driven by unconscious motivations that had their foundations in early childhood experience. In working hard to overcome the strong id instincts in young childhood, the ego becomes weakened, unable to adequately maintain balance. The result in later life is *neurosis* and *moral anxiety*, in which the individual becomes overcome by a threatening feeling of succumbing to 'bad' urges that will lead to punishment. In

an effort to deal with the anxiety and maintain homeostasis, the ego develops *defense mechanisms*.

The therapist's role was to become a kind of authoritative "alter-superego" (Corey, 1996) who cures the pathology of the ego by assisting the patient to access his unconscious, then interprets the hidden motivations for his behaviour and gives directions for change. Once these motivations are understood, the patient can then begin to redirect ego energies towards a healthy balance.

Freud's theories and those of his psychodynamically-oriented successors provided important new concepts to the understanding of human behaviour. His notions of the unconscious and defense mechanisms, for example, are commonly accepted even by the ordinary non-professional (North American) population, and the concept of psychosocial stages of child development (Erikson, 1963) has been influential in the understanding of human psychological development (McLeod, 1998; Nelson-Jones, 1997; Corey, 1996). Freud opened the door to understanding, and other psychodynamic theorists built on that foundation.

Carl Rogers (1998, 1942), however, took therapy in a completely new direction, away from the concepts of pathology, the importance of the unconscious, and therapist-as-authority. For him, the client's conscious awareness and subjective reality were the crucial focus of therapy, and the client as authority on himself must take the lead in determining and accomplishing change. The therapist's role, therefore, was not as authority or director, but as the creator of a safe atmosphere in which the client could fully reveal and face himself. Rogers is therefore cited as the seminal figure in the development of counselling as we know it (Belkin, 1988; Feltham, 1997; Corey and Corey, 1993; Scissons, 1993). McLeod states that:

> The approach associated by Rogers, called at various times

> 'non-directive', 'client-centred', 'person-centred' or 'Rogerian' has not only been one of the most widely used orientations to counselling and therapy over the past fifty years, but also supplied ideas and methods which have been integrated into other methods (1998: 88).

McLeod and Belkin trace the development of client-centred-therapy from Rogers' dissatisfaction with his training in clinical psychology. Disagreeing with Freudian concepts of diagnosis, psychopathology, and the emphasis on the unconscious, as well as the rigid behavioural concepts of Skinner (1974), he began in the 1920s to formulate his own approach. He became a leading figure in the humanistic psychology movement (known also as the 'third force', in contrast to psychoanalysis and behaviourism), influenced by phenomenological and existential philosophy. Central principles in these philosophies are the importance and dignity of self; the importance of individual reality and responsibility for that reality; the concept of an essential aloneness (in that no one can completely possess the phenomenological field of another, and that we face non-being alone); a belief in individual capacity for creativity, choice and growth; and an emphasis on the 'here and now' (Marshall, 1998; Payne, 1998). Not allowed by the medical profession to practice as a psychotherapist, Rogers called his work *counselling* (Feltham, 1997; Bond, 1998). Reacting against the use of the word *patient* because of it's connotations of illness, he used the word *client* because it conveyed the sense of "one who comes actively and voluntarily to gain help on a problem, but without any notion of surrendering his own responsibility for the situation" (Rogers quoted in Belkin, 1988: 210).

By 1940, Rogers had developed his concept of non-directive counselling in which "the client was the expert and the counsellor a source of reflection and encouragement" (McLeod, 1998: 89), and published his theory in 1942 as *Counseling and Psychotherapy*. When traumatized soldiers required therapy after World War II, psychoanalysis was not feasible because of costs, time limits, and a

dearth of therapists. The new non-directive therapy was an ideal solution, and large numbers of new counsellors were trained by Rogers and his colleagues. Rogerian counselling thus became the most common form of counselling in the U.S. (McLeod, 1998.; Belkin, 1988).

In 1951, he published *Client-Centered Therapy* in which he crystallized his central concepts, and I move now to Rogers' voice. Primary was his belief in the importance of the client-counsellor relationship as the heart of therapy, with positive outcomes "due to some experience in the relationship" (Rogers, 1998 reprint: 159). Rogers believed that at the time of entering counselling, the client is distressed, feeling unworthy, incapable and unaccepted. His being, inner and external, is unpleasant and painful, and he has been unable, despite his best efforts, to bring about balance and contentment. Resolution will depend on a courageous examination of himself and his world, including those parts that he would prefer not to acknowledge. Humanistic counselling believes that we all wish to see ourselves as good and competent, and when our self-concept is threatened we defend. Yet it is necessary to examine how our own perceptions may be contributing to the dysfunction we are experiencing. Self-confrontation is frightening. Change is frightening. The possibility of rejection and failure are frightening. The counsellor must therefore create an atmosphere of absolute safety, in which the client can learn about himself and learn to accept what he discovers.

Rogers' conceptions of self and self-actualization were a revelation, for contemporary interpretations seem to be quite different. He defined 'self' not as an organism (that is, a self-contained unit separate from others) but as "the awareness of being, of functioning" (498). This self was the individual in his world, for it is impossible to separate the person from his environment: "...there is no possibility of a sharp line between organism and environment, and ...likewise no sharp limit between the experience of the self and of the outside world" (497). Self is a

product of environment; its development depends on interaction with others, especially others' evaluations of the individual. Our concept of who we are and what we are like depends on the reflection that comes from others. Similarly, many of our values are given to us from others but come to be perceived as though they come from personal experience. There is nevertheless an organismic self, a uniquely individual inner experience.

It is the awareness of conflict between the self-in-its-world and the organismic self that leads to distress and negative self-evaluations. The self's concepts of what is acceptable, worthy, and loveable come largely from the environment; it is the evaluations of others that shape our evaluations of ourselves. In some environments, even "grossly unrealistic perceptions" (192) in self-concept, supported by the society, may be quite effective for meeting life's needs, and create no problems in the individual. Therapy is not necessary. Tensions arise, however, when the individual becomes aware of inconsistencies and discrepancies between internal experience, the organismic self, and the self that has been shaped by the environment. He may try to deny or avoid these aspects of self that are perceived as leading to disapproval from others, but if these tactics of defence of self-concept do not work, the tensions generated may lead the client to ask for help. Thus, for example, the woman whose culture has taught her that it is the wife's role to obey the husband, experiences tension and distress when she realizes that in her perception some of her husband's demands are unreasonable and her inner self does not want to obey. To not obey her husband would damage her self-concept as a good wife. That this self-concept is based on external values of worth may not be in conscious awareness. She has internalized it to the degree that it is in fact *her* value. The counsellor's role, Rogers believed, was the to provide an opportunity to the client for conscious awareness of the wholeness of her experience, both understanding the social locus of her concept of a good wife, and accepting that she may indeed sometimes be at odds with that concept. She can thus redefine her

self-concept in a conscious way that includes an understanding and acceptance of her whole being, enabled then to evaluate her self-worth from an internal locus. She takes control of her own experience. She may decide to obey; she may decide to not obey; she may decide to try to negotiate with her husband. But it will be an informed choice. She has been able to restructure her self-concept in a way that can accommodate her needs to be a social being and a good wife, and to accept, without guilt, feelings that run counter to the meaning of 'good wife' in her world. "The behaviour [that ensues] becomes the meaningful and balanced satisfaction of *all* needs…[and] will satisfy the need for social approval, the need to express positive affectional feelings, the need for sexual expression, the need to avoid guilt and regret as well as the need to express aggression" (524). The client becomes self-actualized, but "in the direction of socialization, broadly defined." (489).

The safe relationship required for this to happen, Rogers believed, can only be created by a completely empathic, unconditional positive regard on the part of the counsellor. The counsellor must understand and accept the client as he is. For Rogers, this was not just a matter of detached intellectual acceptance, but that "we feel something positive towards the client, not just that we feel neutrally towards him" (165). The client must be able to feel absolutely that the counsellor believes him to be worthy and loveable regardless of what seemingly-unlovable things he might reveal about himself. It is only when the counsellor conveys this unconditional acceptance that the client can feel safe enough to begin accepting himself, and thus start working towards change.

The client cannot feel safe and accepted unless he also feels that the counsellor truly understands him. If the client's perception is, "Of course she's being accepting. She doesn't really understand the real me, the bad things I'm thinking and feeling," then he will continue to maintain defences, continue to hold back those parts of himself that he perceives as unacceptable. The counsellor must

thus "assume, in so far as is possible, the internal frame of reference of the client, to perceive the world as the client sees it, to perceive the client himself as he is seen by himself" (29). This does not mean that if the client sees himself as a worthless human being, the counsellor agrees, nor that the counsellor condones all behaviour. It means that the counsellor understands, without emotion or judgment or analysis, that, yes, this is how the client sees himself and this is how that perception fits into his world. The counsellor does not just understand *about*, she "understands with" (33). This *empathy*, this ability to communicate to the client that he is truly and deeply understood and nevertheless accepted, enables him to reveal himself fully and to respond differently. He will be able to acknowledge, without guilt, not only those aspects of himself which he perceives as positive but also those aspects which he has felt the need to deny or hide and which he may decide to change. It is in this atmosphere of "constancy and safety" (71) that the client is enabled to develop insight, identify his own goals for change and implement that change.

Efficacy in relationship is founded on counsellor *genuineness*. True acceptance and empathy and warmth are founded on self-awareness and a secure comfort with that self. Knowing who she is and how she fits into the world allows the counsellor to be comfortable with others as well, a genuinely respectful person, rather than a package of techniques. She does not *act* warm and accepting; she *is*. Rogers' concept of genuineness did not include the aspect of counsellor self-disclosure. His belief, rather, was that the counsellor must not make available her own personality, but must become the client's "alter ego" (40). It is this counsellor 'impersonality' that enables the client to feel deeply understood and accepted, for the counsellor is not 'another person' who is evaluating or approving, but a completely accepting reflection of himself.

The counsellor must strive to understand this inner and external being as the client perceives it. He compares psychologists who fail to do so to early anthropologists who made critical assessments of 'primitive' societies. Both observe from their own frame of reference and thus inevitably apply their own values to others' behaviour. Psychologists can thus be misled to speak of "delusions" and "abnormal behaviour" (494):

> We fail to see that we are evaluating the person from our own, or from some fairly general, frame of reference, but that the only way to understand his behaviour meaningfully is to understand it as he perceives it himself, just as the only way to understand another culture is to assume the frame of reference of that culture (*ibid.*).

Only by staying within the client's frame of reference can the counsellor truly understand, and for Rogers this necessitated a non-directive approach to counselling, grounded in respect for and belief in the client's capacity to understand and direct himself. Though that faith is initially "a completely unproved hypothesis" (23), he believed that if the counsellor consistently acted upon that hypothesis, it would be proved or unproved – and Rogers' belief was that in most cases it is in fact proved. With the best efforts at empathy, the counsellor cannot fully know the client or his needs. Much of the client's experience may not in fact be immediately in conscious awareness to the client herself, yet much of it is accessible. The client must discover herself by herself in order for new knowledge and understanding to be fully relevant and meaningful. For the counsellor to ask questions, interpret or analyze, or direct the client's actions, would be to say that she is not capable of understanding and controlling her life – the antithesis of nonjudgmental positive regard. As well, the locus of control thus becomes the counsellor. Within the core conditions of the relationship, however, the client has the opportunity to make choices – what to say, how to interpret herself, what to do, etc. "The relationship becomes an area for continuing practice

in the making of increasingly mature and responsible choices" (51), for she must be able to make such choices in her outside life.

Rogers' belief was that counselling should be non-directive, but he makes explicit that he does not by this mean 'passive' (27). Simple passive listening can convey an attitude of disinterest and rejection, for the client cannot know what (if anything) the counsellor is hearing, and certainly therefore cannot feel that he is understood. The counsellor's task in empathy is to "clarify and objectify the client's feelings" (*ibid.*), to present those feelings back to the client plainly and stripped of the emotion that they engender in the client. She can thus examine them more calmly and realistically, without fear, guilt or defensiveness.

Rogers was aware that the importance of counselling to the client was whether it led to change. His belief was that in client-centred counselling, the client was able to move from externally-influenced generalizations, which may be false, to an examination of her "primary experience" (143), which in turn led to changes in perception, which in turn inevitably led to more satisfying changed behaviour. It was, however, crucial that these changes come from the client, from her inner resources, rather than from the counsellor's direction. The counsellor, therefore, must not suggest or interpret. The client is capable of interpreting and suggesting for herself, thus maintaining responsibility and control.

Client-centred therapy was not rigidly structured nor did it provide specific techniques, and Rogers himself urged research, modification, adaptation, and the need to give up dogmatic positions. In *Client-Centered Therapy* he wrote that within a decade, non-directive therapy had been successfully adapted to many strategies, purposes and problems, "some of them very diverse indeed from psychotherapy itself" (1998 reprint: 11). It thus became the most broadly used counselling orientation, making counselling available in a variety of settings to ordinary people (McLeod, 1998; Belkin, 1988; Feltham, 1997).

I have focused on Rogers because of his huge importance and pervasive influence. With Rogers came the understanding that therapy must flow from the person, not the theory: the client must be understood in the unique wholeness of his being, rather than diagnosed within the limits of a theory. According to Feltham (1997) the majority of counsellors yet today describe themselves as basically person-centred. The interpretation of 'person-centred', however, has changed: it generally no longer means that one is a purely Rogerian non-directive practitioner, but that one believes that the client's worldview and choices determine the strategies and direction of counselling, and that a warm and accepting relationship is necessary to build client trust and comfort.

Rogers' conception of client-centred counselling has been criticized for such reasons as being simplistic and focused on 'feel good'; as not accounting for the reality of social and counsellor influence; as not considering that clients may not develop beneficial insight and change and may in fact resist change; as not considering that insight does not automatically lead to change; and as not allowing the client to see both the counsellor and the process, thus mystifying both (Corey, 1996; Nelson-Jones, 1997). Few counsellors today are Rogerian purists (Feltham, 1997; Corey, *ibid.*; Nelson-Jones, *ibid.*), and those most closely adhering to Rogerian principles have modified the approach to varying degrees as a result of other theories and research which will be detailed below. Rennie (1998), for example, influenced by interpersonal theory (Strong, 1968) and experiential counselling (Gendlin, 1978) sees the importance of counsellor *transparency*, a congruence that includes openness about what she is doing as a way of demystifying the counselling process, as well as sharing her reactions to the client, a strategy adopted from interpersonal counselling theory. He also believes that though Rogers' core conditions are necessary, they are not sufficient. Although clients must be their own agents of change, it is at times necessary for the counsellor to be directive in the processing of experience, although such directive

suggestions must be acceptable to the client. He emphasized, too, the concept of *reflexivity*, that is, thinking about ourselves, thinking about our thinking, thinking about our feelings (1998:3). Such thinking is the activity which makes decision-making and change possible, and it happens in the silences between actual talk. As well, metacommunication (communication about the meanings of both counsellor and client communication) leads to greater understanding. Rennie also sees a need to help clients formulate and plan for specific goals.

Mearns and Thorne (1997) also are closely allied to the classic Rogerian approach, but again have made significant modifications. They too believe in the need for counsellor openness about process, so that the client understands clearly about the counsellor's role, expectations, and termination. Together, client and counsellor then work out a mutual agreement about structure, process and commitment – a contract which makes it more likely that the client will not be disappointed, confused, or fearful of the unknown. They view counselling as a three-stage process of trust, intimacy and mutuality, with the final stage being the one in which client and counsellor work most closely as a team, both revealing themselves as people and able to appreciate the other as such, and each active in the process of change. Mearns and Thorne also acknowledge that some counsellor needs are inevitably met (for example, a personal need to be helpful) but that this is not damaging as long as the client's needs are primary. We see, then, that in current Rogerian person-centred counselling, the counsellor is considerably more active and involved than in Rogers' original conception.

Such changes in person-centred counselling are the result of an explosion of therapeutic research and theories in the decades from the 1940s onward. Corey (1996) and McLeod (1998) cite research that indicates there may be over 400 therapeutic approaches.

Rogers took the path of complete client-centredness. Two other significant paths emerged out of the 1940s to 1960s. One was that of behavioural theories such as Wolpe's (1958) which focused on dysfunctional behaviour as learned and conditioned. The role of therapy, then, was to help the client learn new more constructive patterns of behaviour for the present and the future, with understanding of the past and internal causes having little importance. The third path was an offshoot of the psychodynamic approach, but influenced by humanistic and phenomenological philosophy. Like Rogers, these approaches (Adler, 1956; Perls, 1969a, 1969b, 1976; and others cited below) emphasized conscious awareness, uniqueness of the client in his world, the importance of his subjective reality, the 'here and now' as more important than the past, and the autonomy of the client in making choices. They also advocated the importance of an accepting nonjudgmental relationship, although not in Rogers' sense of the relationship being the therapy. The therapists in these approaches employed varying degrees of directiveness and structure in helping the client gain insight and decide on changes. This path and behavioural theory converged in cognitive-behavioural approaches such as those of Beck (1976) and Ellis (Ellis and Harper, 1961).

Examples of theoretical concepts, other than those of Freud and Rogers, that have had significant impact on counselling (Corey, 1996; McLeod, 1998; Nelson-Jones, 1997; Belkin, 1988; Zastrow, 1995) include:

- Adler's (1956) 'individual psychology' with its beliefs in the social nature of humans, conscious purposeful behaviour, importance of birth order, and feelings of inherent inferiority and subsequent compensation
- Berne's (1964) and Harris's (1977) transactional analysis with its ego states of adult/child/parent, and analysis of 'scripts'
- Erikson's (1963) ego psychology with its stages of development
- Fairbairn's (1954) and Cashdan's (1988) psychodynamic object relations therapy with its concept of the development of self as

the result of early relationships, especially the primary maternal one

- Maslow's (1954a, 1954b) humanistic theory of self-actualization and a hierarchy of needs
- Jung's (1964) concepts of balance between mind, body and spirit; public persona; personality characteristics such as introversion and extroversion; and the exploration of the unconscious (personal and 'collective') through symbol
- the existential theories of May (1967), Frankl (1963) and Laing (1969), with their concepts of alienation, individual as the shaper of her being and existence through choices and actions, and the totality of the person as a unique individual living within an external world
- the Gestalt theory of Perls (1969a, 1969b, 1976) – to whom Rogers expressed a debt (1998: 4) – which emphasized awareness of the wholeness and unity of experience (mind/body/self/environment), personal responsibility or 'owning' one's feelings, thoughts, and perceptions in the here and now, and 'unfinished business' as a source of problems
- behavioural theories such as Wolpe's (1969) therapeutic uses of classical conditioning, Skinner's (1974) operant conditioning and Bandura's (1969) social cognitive theory which, in addition to conditioning, emphasized the role of observational learning and cognition on behaviour
- cognitive-behavioural theories such as Ellis' (Ellis and Harper, 1961; Ellis and Dryden, 1997) rational-emotive theory of irrational thinking, Beck's (1976) model of negative automatic self-talk, and Glasser's (1975, 2000) reality therapy, which, with empathy and caring, explores inconsistencies between client values, perceptions and behaviour, focuses on reality-testing, and emphasizes responsible choice
- multimodal therapy (Lazarus, 1976), a systematic eclectic use of theories and strategies in order to meet the needs of clients. which can be assessed through an analysis of seven basic personality dimensions (behaviour, affect, sensation, imagery, cognition, interpersonal, and drugs/biology)
- interpersonal therapies (Kiesler and Anchin, 1982), with an emphasis on interpersonal rather than inner experience, and the

belief that the client's relationship with the counsellor is reflective of his relationships with others and change therefore proceeds from an active and challenging client-counsellor relationship

- cross-cultural theories (Sue and Sue, 1990; Pedersen, 1985), which will be examined in more detail below, with their emphasis on the relativity of culture
- feminist approaches (Eichenbaum and Orbach, 1983) with their emphasis on the experience of women in male-dominated culture

Until the 1970s, theories were the primary basis of counsellor action: counsellors would generally become well-versed in a theoretical orientation and employ the strategies of that theory. Clients who believe such specific techniques will help them will likely seek, and continue with, such therapists. But such an approach results in both limited numbers of therapists and limited access to services. The efforts to develop an effective generic approach in the late 1960s/1970s was the result of a perceived dire need for expanded commonly-accessible helping services (Brammer, 1979) provided by helpers who are "broadly skilled and have a holistic approach to the individuals" (Kagan, 1977). Research studies had also begun to investigate therapeutic efficacy (Belkin, 1988; McLeod, 1998). Studies by Truax and Carkhuff (1967) and others of the period investigated the characteristics and qualities of effective counselling. What emerged was the conclusion that depth of counsellor knowledge and training alone had little effect on outcomes. The *essential* factor was the personality of the counsellor, the necessity of attitudes and feelings that enabled a positive relationship between counsellor and client. Rogers' 'core conditions' were paramount. Rogerian counselling had flourished because it fulfilled the basic conditions necessary for efficacy, and those core tenets provide the infrastructure of counselling practice fifty years later (Belkin, 1998; McLeod, 1998; Scissons, 1993).

The conclusion drawn from this and subsequent research was that "if brief training is provided to individuals whose personalities make them suitable as counsellors, they can perform effectively" (Belkin, 1998: 62).

Theories and theoretical approaches provide knowledge and understanding of human behaviour, and thus a foundation for interventions. The research, however, had shown that this type of in-depth knowledge was less important than the Rogerian core. But there now seemed the need for succinct clarification of what the skills were and how to facilitate these conditions in a brief training program (Belkin, 1988; McLeod, 1998). Brammer and Shostrum, in 1960, had written a process-model text describing psychodynamic counselling as stages, with goals and specific strategies (such as reflection of feelings) at each stage. It was not until the 1970s, however, that structured training programs based on a concrete, progressive approach grounded in Rogers' core conditions and the values of client self-determination and responsibility developed as an important innovation in counsellor training. Microcounselling techniques (Ivey, 1976; Ivey and Gluckstern, 1977), and the human resource development model of Carkhuff and his associates (Truax and Carkhuff, 1967; Carkhuff, Pierce and Cannon, 1977) became the prototypes for counsellor training. Ivey's (*ibid.*) analysis of effective counselling generated an inventory of specific skills (attending, reflection, open questioning, etc.) and methods of developing these skills.

Carkhuff, Pierce and Cannon (1977) included also the concepts and skill-development techniques of concreteness and immediacy. The theory of client-centred counselling was thus structured into a 'package' of specific learnable skills.

Other theories and research had shown that a process of structured activity combined with a positive relationship was most likely to lead to positive outcomes. Berne (1964) said that humans have a need for structure and organization. Bordin

(1979) stated that the three factors necessary to a productive working relationship were the establishment of an emotional bond between the client and counsellor; agreement about goals; and agreement about the strategies for achieving those goals. Garfield (1994) cites research in the 1950s to 1970s which demonstrated that therapy has a greater likelihood of continuing and being effective if client expectations are considered *and* if clients understand what will be involved in therapy; that long-term therapy is neither expected nor desired by clients; and that degree of directiveness is best determined by the personality and expectations of the client. Strong (1968) provoked new interest in the social-psychological reality of social influence: counsellors are inevitably and necessarily agents of influence to clients. (Heppner and Claiborn did an extensive review of the research on social influence in 1989.) Lambert and Bergin (1994) cite studies of the period that affirmed the importance of counsellor influence and 'wisdom from experience' as one of the relationship factors common across therapies. In addition to Rogerian core conditions, the client also needs to perceive the counsellor as having knowledge and experience that will be helpful. What emerged from studies and research was the general conclusion that those therapeutic approaches which combined relationship, genuineness as including client 'knowing' the counsellor, the client's clear understanding of the counselling process, and structured helpful directiveness built on client choice, had a better chance of being effective. Client was to be the authority on himself, and counsellor the expert in suggestions and ideas.

In the mid 1970s, Egan (1982, 1986, 1994) developed another significant training model structured as a practical integrative three-stage problem-management strategy: What is happening now? What would I like to have happen? What can I do to make that happen? Brammer (1979) developed a similar 'package'. These skills-development models incorporate the Rogerian relationship skills and techniques of Ivey and Carkhuff, as well as goal-setting and eclectic

attainment strategies.Corey (1996), McLeod (1998) and Nelson-Jones (1997) cite research that indicates the majority of counsellors since the 1970s have adopted an integrative approach.

The grounded theory investigation reveals clearly that a structured three-phase (relationship and exploration, planning for change, implementation of eclectic strategies for change) integrative approach is in fact now the model in current generic counselling training and, consequently, practice (Belkin,1988; Corey, 1996; Corey and Corey, 1993; Cormier and Cormier, 1985; Culley, 1998; Egan, 1982, 1986, 1994; Hepworth and Larsen, 1995; Hutchins and Cole, 1992; McLeod, 1998; Meier and Davis, 1993; Milner and Palmer, 1998; Munro, Manthei and Small, 1989; Nelson-Jones, 1997; Okun, 1992; Pietrofesa, Hoffman, and Splete, 1984; Scissons, 1993; Shebib, 1994). An examination of these speakers' words reveals what effective counselling 'looks like' – what counsellors are expected to *be* and *do* in the field. The characteristics of the generic model that has evolved and the counsellor attitudes, skills and strategies will be presented in the next section.

It seemed beneficial, however, to understand the theoretical foundations on which the model is grounded. I therefore generated a profile of effective counselling as perceived by primary theorists: Adler's (1956) individualistic psychology; the humanistic/phenomenological theories of Rogers (1998), and Perls (1969a, 1969b, 1976); the existential theories of May (1967); the reality therapy of Glasser (1975, 2000), which though cognitive-behavioural in strategy has a phenomenological and existential foundation; the predominantly behavioural theories of Wolpe (1969) and Bandura (1969); Lazarus's multimodal approach (1976); the cognitive theories of Beck (1976) and Ellis (1961, 1975, 1997); and the psychodynamically-influenced-but-cognitive transactional analysis theory of Berne (1964) and his disciple Harris (1977). The essential principles are outlined below.

Primary Theorists: The Shape of Past Practice

The informants unanimously agreed on the following fundamentals, which are also principles of the contemporary model:

- a basic belief in the uniqueness of individuals
- a view of self as grounded in environment and others – that is, self is shaped and influenced by external factors, cannot be separated from its social framework, and must always be considered in this wider context
- an emphasis on the importance of the client's subjective perception of reality
- a belief in client choice and responsibility
- an emphasis on the present – that is, even when past is seen as important, the focus is on how past affects present functioning
- a belief in the capacity of most humans (that is, persons without, for example, organic disorders) to change and to have control over their own lives in a way that satisfies their needs
- a belief in the importance of an effective working relationship based on genuineness, understanding and acceptance
- a belief in the interrelatedness of affect, cognition and behaviour
- the belief that the goal of counselling is that the client will no longer need counselling
- the belief that the success of counselling is due to the work of the client rather than of the counsellor

Differences included concepts of dominant sources of dysfunction; focus of therapy; degrees of directiveness; use of interpretation and challenge; and intervention techniques for promoting change.

The influence of these primary theorists will be reflected in the description of current generic counselling, below. References are made to theorists who specifically advocated particular practices that are essential elements of the contemporary process model.

Findings: Effective Generic Counselling

The goals of Western counselling may be varied. McLeod (1998: 8) summarizes the diverse aims that counsellors attempt to achieve with their clients:

- insight into the underlying reasons for emotional difficulties, and thus an increased ability to take control
- self-awareness of thoughts and feelings, and of how one is perceived by others
- self-acceptance and positive self-regard
- self-actualization or individuation: fulfilling potential or integrating conflicting parts of self
- problem-solving, either in resolution of a specific problem or in developing general problem-solving skills
- psychological education, in that the client acquires new ideas and methods of understanding and controlling behaviour
- development of social skills such as effective interpersonal communication
- cognitive change of maladaptive thought patterns
- behaviour change of destructive or maladaptive behaviours
- systemic change, such as change in family systems
- empowerment: skills and knowledge which will help the client deal with social inequalities
- enlightenment, i.e., a higher state of spiritual awareness

The achievement of those aims depends on a combination of counsellor values, qualities and strategies.

Values and Ethics

The central values in counselling reflect the beliefs in the uniqueness and dignity of humans, the unity of inner and external experience, importance of individual subjective reality, and respect and responsibility to self and others.

Counsellors act on the beliefs that all people should have access to helping resources and services when they need and want it; that the counsellor must approach each person with dignity, respect and fairness; and that each client is capable of and has a right to self-determination. As a profession, we believe that all people have the desire and the potential to live productive lives in which they cope, to their satisfaction, with the problems and complications of life, and society has an obligation to provide avenues whereby they can resolve dilemmas in themselves and their environment. Because each person is unique and ultimately capable, each has the right to make her own choices, regardless of the counsellor's beliefs. Counsellors can suggest options, help clients weigh advantages and disadvantages, but clients determine which path they will take, for they are the ones who live their lives within their own social context.

These values have combined with moral philosophy and law (Bond, 1998) to provide a framework of conduct for counsellors (American Counselling Association, 1995; British Association for Counselling, 1992; Canadian Association of Social Workers, 1994; Canadian Counselling Association, 1999; Corey, Corey and Callanan, 1993). Counsellors are obligated to respect the client's right to confidentiality. Unless it is necessary for legal reasons or certain life- or safety-threatening situations, only the client can decide who will be allowed to share her issues. In order to provide the best help possible, counsellors are ethically obligated to be honest with clients. Honesty in an ethical sense may involve such things as admitting lack of knowledge in certain issues (for example, cultural differences or specialized areas of counselling), explaining limits in agency capability or policy, or acknowledging breaches in confidentiality. (Honesty in a non-prescribed, non-ethical sense may include discussion of one's experience, or appropriate acknowledgement of one's feelings – elements of genuineness to be discussed below.) Counsellors are obligated to be competent. They must have adequate training, and must endeavour to continue learning. They must know their

limits, request and accept supervision and support, or refer the client to others if they themselves are unable to deal competently with an issue due to lack of knowledge, value conflict or personal issues. Competence is a factor in the counsellor's obligation to protect their clients from harm, both physical and psychological, during the counselling process (Bond, 1998).

The betterment of society as a whole, effecting social change that benefits all, is also seen by some as an obligation for counsellors (Canadian Association of Social Workers, 1994; Corey and Corey, 1993; Thorne, 1998; Zastrow, 1995; McLeod, 1998). Although within the limits of the counselling workday, this may only be reflected in attitudes and behaviours towards clients, counsellors may be involved in interagency meetings, community organizations, advocacy groups, and so on.

The Counsellor-Client Relationship

The good counsellor believes in the above values. But belief in these values and the desire to help are not sufficient to be effective (Rogers). An effective counsellor is one whose client believes that the counsellor has her best interests in mind, that the counsellor accepts and understands her and her situation, and that the counsellor has the ability to help the client achieve positive change.

A warm, genuine, accepting understanding relationship is essential (Rogers, Perls, May, Glasser, Adler, Beck, Harris, Bandura). Ellis and Dryden (1997), for example, point out that despite rational-emotive therapy's directive authoritative style, it is essential that REBT therapists "strive to *unconditionally accept* [italics his] their clients...[and] to be *therapeutically genuine*" (28), to show both affective and "philosophic" (*ibid.*) empathy, and to be appropriately warm. Without an effective relationship, change is not possible – indeed, continued counselling is likely not possible. Most clients, regardless of their

background, will be apprehensive: asking for help with personal problems from a stranger is seldom easy. The counsellor must therefore build a relationship in which the client trusts the counsellor and believes in her ability to help, and will therefore be willing to reveal himself.

The competent counsellor therefore exhibits these core qualities regardless of client backgrounds, lifestyles, behaviours and problems, from the initial meeting. Office environment, common courtesies such as the offer of a comfortable chair or coffee, and some initial small-talk ("Isn't it terrible weather today!") indicate warm acceptance and respect (Glasser).

Empathy – the ability to understand, and *show* that one understands, what the client is saying and feeling – is a central relationship-building skill, for if the client feels deeply understood and yet accepted, he will better understand and accept himself, and therefore be less fearful of change (Rogers, Adler). Empathy can be demonstrated by reflecting the client's feelings and paraphrasing his statements, as well as by paying attention to and reflecting emotions that become evident in non-verbal behaviour. Warm empathy can be demonstrated from the first moments of contact, as mentioned above, for the competent counsellor understands that clients may feel awkward, uncertain and distrustful, and will thus attempt to put them at ease as much as is possible under disquieting circumstances. As the client sees that the counsellor is trying to understand, without judgment, trust grows (Rogers, Adler, Perls, Glasser).

Genuineness is in fact a key factor in building a trusting relationship. Not only is the counsellor genuine in Rogers' sense of being a truly warm and accepting person, rather than acting it, but the effective counsellor also appropriately shows herself as a real person. A factor in being real is that the counsellor is willing to use self-disclosure, whereby she shares her own feelings and experience. The self-disclosure can be about experience in her life, or about

her experience in this process of counselling with this client. Appropriately done – and appropriateness is crucial – this can demystify the counsellor and reduce feelings of threat and defensiveness that may arise from a conception of counsellor-as-authority. It also helps demonstrate understanding; calms anger or worry; offers helpful perceptions and new perspectives; gives feedback; encourages insight; and motivates change. The counsellor can admit mistakes, share personal viewpoints and reactions, show appropriate humour, etc., but in ways that do not encroach on client self-determination or damage the therapeutic relationship (Perls, May, Adler, Ellis). Even Rogerian person-centred counsellors believe in the benefits of counsellor self-disclosure and genuineness as a person (Mearns and Thorne, 1997; Rennie, 1996; Thorne, 1998)

Immediacy (Adler, Perls, Ellis, Glasser) is a relative of self-disclosure. The effective counsellor deals with significant events that are happening in the counselling process 'right now'. This may entail pointing out client behaviour, focusing on a client statement, pointing out something that is happening in the process, or revealing one's own reaction to client or present process. Attending to significant happenings immediately helps both counsellor and client to gain insight and understanding of important issues that might otherwise be missed or forgotten.

Adjusting one's verbal and non-verbal communication styles to those of the client is also necessary (Adler). Rather than using academic or counselling jargon, the effective counsellor uses language that is clear and understandable (Lazarus, Harris, Beck, Glasser). A client for whom English is a second language may require more adjustments in rate of speech and language – but naturally, without condescension. A client who prefers to use formal styles of address should be addressed similarly – not everyone is comfortable on a first-name basis with virtual strangers or with those seen as authority figures. Attending to non-verbal behaviour will give the counsellor cues about the client's attitudes to personal

space, touch, eye contact and the like, as well as feelings and attitudes about his situation. Non-verbal behaviour is not as easily controlled as verbal and thus often sends messages and information of which the individual may not be aware and which may conflict with his words (Rogers, Perls, Adler). The counsellor also attends to her own non-verbal behaviour to ensure that she is not sending messages that may create discomfort or distrust (Rogers).

Effective questioning and assessment is important both for planning a course of action and for building a relationship (Glasser, Ellis, Beck, Bandura, Lazarus, Adler, Perls). Making the effort to learn as much as possible about the client's circumstances demonstrates the counsellor's willingness to understand the situation from the client's viewpoint and to develop interventions appropriate to the client. The client's statements are his perceptions and opinions, and although the counsellor may formulate a different view of the situation, an effective counsellor will respect and accept the client's viewpoint regardless of personal opinions (Rogers, Adler, Ellis, Perls, Glasser). The presenting problem may be quite superficial, but may also be the least threatening to the client as a starting point. As trust and comfort develop, more significant issues or distortions will surface and can be appropriately faced.

Effective interpersonal skills using 'I-language' and concrete descriptions of behaviour rather than emotional, evaluative, interpretive or labelling language reduces client defensiveness and fear of being negatively evaluated (Perls, Lazarus). By using such communication techniques, it is possible for the counsellor to present even those observations that might otherwise be psychologically threatening, thus enabling the client more easily to accept and consider such observations and gain insight into himself.

The competent counsellor also determines what expectations the client has of the counsellor, and clearly explains her own role, the counselling process, and

what will be expected from the client (Adler, Lazarus, Bandura, Beck, Perls, Ellis. Harris, Glasser). The counsellor will ensure that the client understands that she will not compel any specific course of action, although she will provide new perspectives, observations, information, options, suggestions, practice and feedback as they work together. The reasons for this process (e.g., what is appropriate for one person may not be so for another; the client is the source of successful change; etc.) must also be explained. Confidentiality will also be assured, though with an explanation of those situations in which confidentiality might have to be broken. In this exchange of expectations and information, client and counsellor thus begin to work together to formulate a mutually acceptable plan, with the client being an active participant whose strengths, life context and wishes are respected, acknowledged and utilized in the process of resolution.

Attitudes and Characteristics

Without the relationship components of warmth, unconditional acceptance and genuineness, effective counselling is not possible. There are, however, other counsellor characteristics that are necessary in order to manifest the above values and meet the needs of the client.

Self-Awareness

The counsellor's self-awareness is of prime importance (Rogers, May, Ellis, Perls, Adler). Effective counsellors know themselves, and understand the natural, emotional and environmental forces that mould them, and they are comfortable with who they are. The good counsellor examines and understands his own value and belief systems, emotional make-up and tendencies, coping and defense mechanisms, areas of need, goals and priorities, relationship needs and wants (power and intimacy, for example), attitudes to conflict, prejudices,

emotional or other problems, strengths and weaknesses. This exploration is done with a willingness to face the less desirable characteristics and to work at change.

Defensiveness and lack of awareness will negatively affect the work with clients The counsellor who is blind to self will inevitably, perhaps quite unconsciously, allow personal opinions to affect the therapeutic relationship, or will attempt to fulfil personal needs through the client. For example, the counsellor who has difficulty handling criticism or others' anger may become angry or defensive if a client is resistant or manipulative. Self-awareness enables the counsellor to better keep the client's needs foremost, separate the personal from the professional, and forestall problems by prior preparation and personal development.

It is equally crucial for the counsellor to understand and accept that other people are different, that each of us is unique (Rogers, May, Lazarus, Adler, Perls, Beck, Glasser). This is true not only for those of different ethnic and cultural backgrounds or social classes, but also for those who may seem quite similar to the counsellor. The good counsellor acknowledges and accepts that values, priorities, styles of interaction, perceptions of what is a problem, etc., differ, and what may not be 'normal' in the counsellor's experience may be so in a client`s. A problem is only a problem if it is a problem to the client (Adler, Bandura, Lazarus, Perls, Rogers, Beck, Harris). This understanding and acceptance allows the counsellor to remain non-judgmental and non-coercive regarding client behaviour, goals and decisions.

Flexibility

The effective counsellor is flexible in terms of strategies, process, interventions, and time (Adler, Perls, Lazarus, Bandura, Ellis, Glasser, Beck). At least two contemporary informants (Zastrow, 1995; Hepworth and Larsen, 1993)

also say that counselling need not always take place in the office. It may sometimes be more productive and appropriate to see the client at a location other than the counsellor's office, or at an unusual time. Seeing clients in their home environments can be especially effective with multi-problem or highly resistant untrusting clients, who can thus feel more in control.

Effective counselling is a process with a beginning, a middle and an end, and clients will require more or less time at various stages of the process (Rogers, Glasser, Bandura, Lazarus, Adler, Perls). For example, one client may need several sessions before the action stage can begin; another may realize that the process of talking the problem through in the first session was sufficient for her purposes of change. The good counsellor is able to adapt to the client's needs regarding time and process.

Warmth is a necessary ingredient of effective counselling, but the effective counsellor is alert to the client (Adler). Warmth means demonstrating friendliness and caring, but expression of warmth may need to vary with client, time, stage of process, and needs. A smile, handshake and attentive listening may be the only appropriate expression with some clients throughout the counselling process, whereas others may demonstrate a need for touch. The client's needs, behaviour and non-verbal cues guide the counsellor. Ellis, for example, cautions against excessive warmth with clients who have an extreme need for approval and love, for the counsellor may thus reinforcement this thinking.

Flexibility in questioning may also be necessary. Although open questions are generally recommended as the best way of obtaining a wide range of information and giving the client some control over content, closed questions may at times be more effective, for example initially with an uncomfortable or reserved client (Glasser, Adler). The good counsellor uses 'why' questions with care, for they may be difficult to answer, or may cause defensiveness (Perls). Should a

client indicate reluctance to examine certain issues, the counsellor will understand if and when it is necessary to move on to less threatening areas of exploration and when it is necessary to challenge. As comfort and understanding of the process develops, feelings and issues will be explored in more depth. There may, too, be times when talk comes to a standstill: silence may be a necessary and productive strategy, and the effective counsellor is comfortable with such periods, even long ones (Rogers, Perls, Adler). (Adler, Cashdan [1988] and Rogers describe whole sessions of silence.)

The effective counsellor knows when it is appropriate to be assertive, challenging or directive, and to what degree (Ellis, Adler, Perls, Glasser; Bandura, Lazarus, Harris, Beck). The counsellor, for example, would employ different strategies with a client who has failed to follow through on an agreed-upon activity once, versus the client who has done so consistently. She would be more directive with a client who has a limited repertoire of personal coping skills or one who has little faith in his ability to effect change, and less so with a highly motivated client who has developed personal insight and ideas. Confrontation or challenge can be a tool for helping clients develop insight and to motivate movement towards the desired changes which the client has identified (Perls, Adler, Glasser, Ellis, Beck, Harris). It must be used with gentle care, when comfort and trust has been developed between client and counsellor, and only when it is quite necessary in order to benefit the client.

Contemporary counselling borrows interventions from all theoretical perspectives. The effective counsellor has a knowledge base of affective, behavioural, cognitive and problem-management strategies. The theorists, too, understood that what is appropriate for one client or one problem may be impractical or ineffectual for another (Lazarus, Adler, Bandura, Ellis, Beck, Glasser) and developed variations in their own orientations. As we have seen,

Rogers' techniques of empathy and positive regard are core skills in all counselling situations, and empathy, insight development and the strengthening of self-esteem may indeed be the only strategies necessary to help some clients. Most, however, will benefit from the additional use of other techniques. All the theories agree that any change involves all three dimensions, affective, cognitive and behavioural. Although she may have a preference for and special skill in one orientation, the competent contemporary counsellor is eclectic, able to utilize appropriate helpful strategies according to the needs, personality and willingness of the client, and flexible enough to offer different options if a strategy proves unsuccessful or impractical.

The good counsellor can cope patiently and respectfully with resistance and testing, nor does she become defensive. There are reasons for such client behaviour and the counsellor will try to ascertain those reasons (in her own mind or with the client) and work through them with the client if it becomes necessary – even if they involve the counsellor's own behaviour. The counsellor may in fact be frustrated, and it may be beneficial for her to let the client know this; but it must be done in a non-emotional, concrete manner that simply describes the `what is happening right now'. The counsellor understands too that resistance is a normal reaction to the fear of change and may disappear on its own as the client develops trust; it need not therefore always be an issue for discussion (Glasser, Ellis, Beck, Adler, Harris).

Lastly, the effective counsellor works to expand his life experience, continuing to learn about people, the community, society, and developments in counselling (Rogers, Bandura, Lazarus, Glasser, Adler).

Operationalizing the Principles

The effective counsellor not only values client wholeness, responsibility and choice, but acts according to those beliefs at all stages of the counselling process. She presents observations, perceptions and reflections in such a way as to allow and encourage the client to correct misconceptions: tone of voice and wording must be such that statements are not perceived by the client as 'hard fact' and 'evaluation, for clients may defer to the counsellor, accept her as the authority (Rogers, Perls, Adler, Ellis, Glasser). If the counsellor responds in absolute or evaluative ways, the client is more likely to refrain from responding to incorrect counsellor perceptions or interpretations, or may simply agree rather than contradict what he may see as an authority figure. (See Rennie, 1994, for a recent discussion of client deference.) The competent counsellor does not assume that the client is thinking or feeling in certain ways, nor does she assume that the client has the same thoughts or feelings which the counsellor might experience in a similar situation. Perception-checks and invitations for feedback ensure that the client has the opportunity to clarify his situation (Rogers, Adler, Perls, Beck, Glasser, Harris, Ellis, May).

Questions must always focus on what is happening in the client's view of his inner and external experience. The client can thus tell his story, and in telling it start on the path to understanding, control and responsibility (Rogers, Adler, Beck, Ellis, Glasser, Bandura, Lazarus, Harris). Adler's basic question, "What would you do if you were completely well?" (332) emphasizes that it is the *client's* meaning of wellness that is important, not the counsellor's. The minimum details that should be obtained include information about:

- the client's perception of the problem
- who else is involved in, affects, or is affected by the problem situation, and how they perceive or react to it

- any significant recent life changes
- what the client wants and needs
- what the situation means to the client – interpretations, thoughts and feelings
- when, where, how often the problem occurs (as appropriate) and its duration
- how the client has tried to solve the problem, and the results
- cultural, social, health and economic factors that may have an influence
- available community and/or family resources

Except for Rogers, action and a structured plan is necessary for effective change, for concrete, 'seeable', doable goals give direction and thus generate hope, confidence, motivation and belief in the possibility of change. And the counsellor and client must be a team: the counsellor must not take the role or allow herself to be perceived as the authority. Successful outcomes depend not on the counsellor but on the client (Ellis, Beck, Glasser, Bandura, Lazarus, Harris, Adler, Perls). The counsellor allows the client to set priorities and decide what he would like to change, helping him get started by asking such questions as "Of the issues we've talked about, which would you most like to change?" She then helps the client define the selected goals in concrete, measurable terms which will give direction to the development of strategies of attainment. Personal responsibility in setting goals helps the client understand that he is capable, can control outcomes in his life.

During this process, the competent counsellor also helps the client assess if the goals are realistic and achievable. Included in this assessment is an exploration not only of the benefits but also the possible obstacles and risks involved in the change: Will family members and friends be supportive, for example? What new problems might the change create? (Adler, Glasser, Beck, Ellis, Lazarus). This orientation to both past and future enables the client to make more informed

choices. Although he cannot know for sure what will happen, he will thus have prepared himself as much as possible. Having given support and helpful direction, the counsellor then allows the client to make the choices. Should the client change his mind, for whatever reason, the counsellor will again assist him to make new choices. A contract outlining the agreed-upon plan and client and counsellor expectations, though it can be basic, verbal and informal, can strengthen commitment and motivation (Harris, Glasser, Lazarus).

The effective counsellor is able to be directive, that is, to guide discussion or present observations, options and suggestions about strategies and interventions that will enable clients to attain their goals. This may involve not only the work during counselling sessions but also 'homework' activities which the client acts on between sessions and which will develop and reinforce change (Glasser, Bandura, Lazarus, Adler, Beck, Ellis, Perls). The counsellor clearly explains the strategy and its intent and usefulness, and demonstrates if necessary. The strategy must, however, fit with the client's internal and external life, and he therefore makes the final decision as to whether to follow through or not. The counsellor consciously works to prevent her own values, goals, problems, experiences and beliefs to be influencing or deciding factors in client decisions. The counsellor may, appropriately, share personal beliefs and experience with the client, but such sharing should never be an overt or subtle means of coercing the client to specific action.

The effective counsellor evaluates progress on a continual basis. Clients may not be willing to tell the counsellor if strategies have proven to be inappropriate or ineffective, for this may appear to them as criticism of the counsellor; or they will report that things are going well because it is easier sometimes to pretend all is well than work at change. It is the counsellor's responsibility to ask, discuss, look for evidence of change, and to work with the

client to develop new strategies and increased motivation if necessary (Perls, Ellis, Adler, Glasser, Bandura, Wolpe, Lazarus, Beck).

The termination process too allows for client self-determination. Except in generally unforeseen circumstances, counselling does not end suddenly. Counsellor and client together evaluate progress and assess the client's readiness to cope without the counsellor's support, for the goal of counselling is counsellor redundancy. Preparation for termination, which must begin well before the end, includes consolidation of the skills and attitudes that have been achieved; exploration of possible difficulties the client may encounter and strategies for coping with obstacles should they arise; and development or consolidation of resources and support systems for herself in the environment (Glasser, Ellis, Adler, Harris, Beck, Lazarus). The client again has control of and responsibility for planning his own life, with the counsellor's assistance. An important issue to be dealt with in this final stage is the fear and sense of loss which the client may feel (Rogers, Adler, Ellis, Glasser,). Counselling is an intense emotional process. A relationship has been built; and changes, learning and skill-development have occurred which have not yet been fully tested in real life. The future is unknown and the helper will not be as easily accessible. Clients must therefore be given the opportunity to express these feelings, and a follow-up session (or more) should be set up. The counsellor and client can thus assess efficacy of outcome, and the client will as well have a sense of help being available if needed.

Throughout the counselling process, the good counsellor ascertains, encourages, challenges and builds on client strengths (Rogers, Adler, Glasser, Beck, Ellis). However hopeless and inadequate a client may feel upon entering counselling, he has been able to cope somehow with at least some of the requirements and complexities of life. (The ability to acknowledge that one needs help, and to ask for it, is in itself a strength.) The counsellor's assistance in

discovering, utilizing and developing these resources cultivates both hope in change and a belief in one's own ability to take charge of that change.

The effective counsellor is a role model of respect, acceptance for others, self-acceptance, and interpersonal skills. In accepting the client, she encourages the client to accept himself and others as well. In allowing the client to make assessments and choices, she enables him to have control over his own life, thus encouraging belief in his ability to do so, and also builds awareness of his interactions with others. In communicating nonjudgmentally and calmly, she not only conveys acceptance but demonstrates skills that will be useful in the client's own relationships with others (Rogers, Perls, Adler, Glasser).

The Competent Counsellor Does Not...

We have looked at the attitudes and behaviours of effective counsellors. Effective counsellors also take care not to respond in ways that may have a negative effect on the helping process. To ensure that trust, communication and progress continue and client defensiveness and resistance are minimal, the counsellor does not do the following:

- Lecture, or pressure the client. Lecturing, moralizing and coercion undermine self-confidence, damage self-concept, create guilt and defensiveness, and set the counsellor up as an external evaluator of the client (Ellis; Adler; Perls; Glasser; Ellis; Beck; Bandura).

- Give direct advice or provide 'the solution,' for what may have worked for one person may not work for another. Providing the solution also takes away client control and responsibility – it does not promote client understanding of his reality or development of new attitudes and behaviours that will help him resolve his own problems, but keeps him dependent on external evaluation and direction (Adler; Ellis; Perls; Beck; Berne; Lazarus; Glasser).

- Argue or try to convince. The client's perceptions and feelings are what they are, and coercion and pressure may simply result in clients defending their views and feelings more strongly, thus losing the opportunity for reflection, understanding and beneficial change (Ellis; Adler; Perls; Harris; Beck; Glasser).

- Judge, criticize or place blame on either the client or anyone involved in the client's problem. This does not mean that the counsellor condones destructive or asocial behaviour or attitudes. It means that the counsellor does not make judgments about the worth or character of the person or others, regardless of what they may have done (Ellis; Perls; Adler).

- label or diagnose a client, for such labelling can be seen as generalization or 'factual absolute' that may lead to a negative sense of self – "All I am is an alcoholic grovelling toady" – and loss of perspective as to the whole person. The client (and the counsellor!) can become stuck in the label rather achieving an understanding of himself as a whole being (Ellis; Perls; Adler; Bandura; Glasser)

- excuse behaviour, or sympathize, with such statements as, "That's OK, you're human and everyone backslides." Excusing may enable the client to avoid the responsibility of facing, for example, self-defeating or manipulative behaviours, and avoid the hard work of change (Ellis; Glasser; Adler; Perls; Beck)

- minimize the client's concerns, even with such well-meant statements as, "That's nothing to worry about…" for what may not seem as unimportant to the counsellor or others may be important to the client. The client feels what he feels at the moment and needs to have it acknowledged. He himself, with the counsellor's assistance, will come to make decisions about the importance of those concerns (Ellis; Adler; Perls; Harris; Beck)

- provide vague and pointless sympathy or reassurance such as, "Don't worry; everything will be alright." The counsellor does not know that everything will be alright, and the client, somewhere in his mind, will be aware of that. Trust and belief in the counsellor's competence will be affected. And such sympathetic reassurance minimizes the reality that meaningful change requires effort (Adler; Ellis; Perls; Glasser; Beck; Harris)

- use sarcasm or inappropriate humour, although humour can be a useful tool, well used and correctly timed (Adler: Ellis; Perls)
- ask leading questions (e.g., "Don't you think it`s time...?") which imply that the client is expected to respond in a specific way. (Glasser; Ellis; Adler; Perls; Beck; Lazarus; Bandura)
- interrupt the client, except to intervene appropriately in destructive communication or behaviour. Interruptions lead to breaks in thought, frustration and a sense that one is not being completely listened to (Adler). Perls believed in the positive effects of the frustration that comes from interruption, but his view of 'interruption' was that while all questions were essentially interruptions, deliberate interruption was a kind of challenge that enabled the client to focus on an important aspect of process
- dominate the discussion: it is the client's views, perceptions, interpretations, disclosures and philosophy that should be the focus of sessions, not the counsellor's (Ellis; Adler; Perls; Glasser; Beck; Harris)
- behave passively, giving no guidance, structure or direction (all)
- focus on the past, which cannot be changed (all)

Counselling Interventions

Interventions are the specific techniques that counsellors suggest to clients as possible ways of achieving desired change. "One of the characteristics of highly competent or gifted counsellors is that they are adept at creatively modifying techniques or exercises to meet the needs of individual clients" (McLeod, 1998: 352). Interventions in modern counselling have their foundations in the theoretical assumptions of causes of dysfunction and distress.

It must be noted that in no case should the counsellor guarantee that the suggested method will work; she can only explain why it is potentially helpful (Adler). And in all cases, the intervention should be chosen with care to suit the client and his situation, not simply `pulled out of a hat`. It has already been made

clear, too, that only the client can decide if he wishes to try a specific suggestion, and his decision may be based on many factors: environment, personality, values, possible consequences, or, as Ellis point out, faith in the counsellor.

All the theorists believed in the interrelatedness of emotion, thought, and behaviour, and in inseparability of the client from his social context. All interventions therefore involve affect (emotion), behaviour/action, cognition (thoughts, perceptions, assignment of meaning, use of language, etc.), and recognition of the individual as social being. Most interventions, however, focus on one major aspect for change, with the expectation that the others will inevitably change as well. In exploration and assessment, it will become clear which domain (affective, cognitive or behavioural) is in greatest need of strengthening, and which other areas may benefit from change. The well-prepared counsellor can present a combination of suggestions to facilitate client goals.

The behavioural and cognitive-behavioural theories especially have made a huge contribution of strategies which, alone or in combination, have proved effective in a wide spectrum of problem situations (Nelson-Jones, 1997; Corey, 1996; McLeod, 1998). There is a considerable body of research that states the cognitive-behavioural interventions (combined with the core conditions of relationship) are most effective. (Zastrow, 1995).

I shall focus on pioneering theorists who have provided the foundations of interventions commonly used in contemporary counselling: the affective strategies of Rogers (1998), who is central, and Adler (1956); behavioural interventions from Wolpe (1982) and Bandura (1969); and the cognitive strategies of Ellis (1961, 1997) and Berne (1964). The impact and influence of these techniques is evident in how many are still in use today, in their original form or modified by others.

Affective

Rogers

Rogers has been discussed at length, so I shall simply reiterate that his counselling approach dealt with affect – feelings such as self-esteem, guilt, worthlessness, etc. Client-centred counselling had no techniques as such. The core conditions of genuineness, warm unconditional acceptance and empathy were the treatment, as we have seen. In perceiving the counsellor's empathic unconditional acceptance, the client develops similar positive feelings about himself. The changes in affect are the result of changes in the client's perceptions – his thinking – about himself, and those changes in turn lead to changed behaviour. The client's feelings are based on his perceptions and "it is the perception, not the reality, which is crucial in determining behaviour" (492). A revised perception of his self-concept leads to a consequent revision of behaviour. If he learns to think of himself as a worthwhile likeable person, he will no longer be afraid, for example, to express opinions or enter into relationships.

Adler

Adler (1956) viewed human problems as social in nature. He believed that we all innately feel inferior to others in some way. Although biological and environmental factors influence us, we nevertheless create ourselves and are created by our active choices, depending on the needs that arise from our feelings of inferiority – which may not be in complete conscious awareness but can be accessed. We set goals, make a 'life plan', very early in childhood and then continue to make choices that are consistent with those goals. Life's main goal becomes to feel less inferior, to try to achieve perfection. This can and should be an exciting and creative challenge, motivating us toward growth and cooperation. Dysfunctional feelings, thoughts and behaviours are the result of faulty goals.

Mental health consists of self-esteem, connectedness to others, and social responsibility.

Adler also believed that birth order was influential in the development of child to adult. Each child would be treated differently by the parents, leading to different behaviours, perceptions, and feelings in each child, and thus a different life plan.

'John,' for example, may have been the youngest child, spoiled and pampered but also seen as less capable than his older brothers or sisters. Thus he sets a life-goal of maintaining that pampering but also overcoming his feelings of inferiority by gaining power. His method for doing both becomes depression. Being depressed becomes a way of ensuring that others will worry about him, take responsibility for him, and make efforts to take care of him.

From then on, his memories, interpretations, feelings and actions are oriented toward achieving that goal, through that method. If suggestions are made for overcoming the depression, he will resist, for his emotional needs are being met. His depression becomes a way of having power and control over others, thus proving his superiority to himself.

Adler viewed clients holistically as actively goal-oriented social beings for whom happiness and a sense of worth ultimately come from a cooperative, respectful involvement with others. Each of us must attempt to achieve not only satisfaction in our own lives but satisfaction for others. The therapist, through building an accepting, friendly, completely undemanding relationship, and facilitating insight and change, becomes the person with whom the client first learns to cooperate. Adler used a variety of strategies – whatever seemed appropriate to the client – to promote increased feelings of worth and adequacy, including:

- friendly and gentle challenge as a tool for increased self-awareness and insight into the purposes and rewards of behaviour
- encouragement, both of the client's sense of feeling 'good enough' and of courage to take risks (for the client hangs on to the present patterns because they do work to an extent, and change is frightening)
- the use of frustration as a tool for change: frustrating John's manipulation and resistance to change, for example, by agreeing, when he says, "I should like to stay in bed all day" (347), that by all means, he should just stay in bed all day, if that is what he really wants to do
- the use of paradoxical intent [known commonly as 'reverse psychology']: suggesting to John, for example, when he complains that people treat him badly, that he watch for and record every such instance, even the smallest slight, every day for the following week
- the exploration of family dynamics, especially birth order and sibling relationships
- the exploration and understanding of behaviour, thoughts and feelings by recalling memories from earliest childhood on, and dreams, as sources of information about one's inferiority and 'life plan'
- the use of attention to what is happening in the 'here and now' of the relationship as a way of understanding general patterns of experience
- humour as a tool for gaining perspective
- metaphor in both dreams and statements as a tool for both understanding past and present experience and creating new experience
- homework assignments that encourage social involvement which will result in feelings of worth: suggesting to John, for example, that each day for the next week he might try doing one thing that pleases someone else

Behavioural

Wolpe

Wolpe (1982) developed an extensive theory of behaviour therapy. He saw psychological problems as manifested in behaviour, which was in turn rooted in the primary emotion of fear (of rejection, of punishment, of being thought stupid, etc) and influenced by faulty (that is, misinformed or unrealistic) cognition. Perception, Wolpe said, is not just sensation, i.e., a physiological process, but a complex process that includes interpretation and expectations based on conditioned learning based on both unconscious associations and reinforcement. Fear both prevents some actions that could be adaptive, and promotes actions that are attempts at adaptation but in fact are maladaptive. The faulty perceptions and fear, he believed, had been learned, had become habits, conditioned by previous experience. He also believed in the physiological connections between thoughts, emotions and behaviour: anxiety, for example, was not just 'in the mind' but had biological foundations and effects. His definition of behaviour therapy therefore was "the use of experimentally established principles and paradigms of learning to overcome unadaptive habits" (1). The maladaptive habits of fear and anxiety could be extinguished and adaptive ones substituted by use of the principles of conditioning and inhibition, with the new habits of response inhibiting the previously conditioned responses.

Unassertive, socially anxious behaviour, for example, for Wolpe is the result of previous experiences wherein self-expression had been punished, or had led to unpleasant consequences of some kind. (Wolpe defined assertive behaviour as "the appropriate expression of any emotion other than anxiety toward another person" [119]). The therapist helps him first understand how his expectations and perceptions lead to anxiety, then assists him to have experiences in which self-expression results not only in decreased unpleasant consequences, but in positive consequences. One technique would be to encourage appropriate expression of other emotions, for to have any other emotion in the forefront of awareness

weakens the anxiety reaction. The client practices appropriate self-expression and tests out his new behaviour. Positive consequences such as having control of a situation, or being listened to, thus create positive feelings, and he continues the behaviour that provides those rewards.

An in-depth analysis of the science, theory and strategies is not feasible, but an overview of the application of behavioural principles to a wide variety of client situations, as detailed by Wolpe, reveals the extent to which counsellors can – and do – use behavioural interventions:

- progressive relaxation training involving muscle tension combined with conscious awareness of the sensations, accompanying thoughts and positive emotions
- positive reinforcement (tangible rewards, attention, charting, etc.) and punishment (time-outs, removal of privileges) in self-change or changing the behaviour of others
- structured techniques of gradual exposure and desensitization for phobias or extreme fears
- recording behaviour and attendant thoughts and feelings between counselling sessions as a way of discovering patterns
- behaviour rehearsal – the practice of adaptive behaviours and thoughts prior to events that normally produce anxiety
- aversion therapy – the structured production of unpleasant consequences to maladaptive behaviours that previously have produced pleasant feeling and consequences
- structured exercises in the treatment of sexual dysfunction
- 'thought-stopping', in which the client first develops awareness of dysfunctional cognition that lead to the undesired behaviour, and then follows a procedure for interrupting those thoughts
- systematic guided imagery in changing perceptions, emotions and physiological symptoms

Bandura

Bandura (1969) diverged from Wolpe's strict scientific behavioural viewpoint, believing that in addition to classical (behaviour produced by unconscious development of associations) and operant (behaviour produced by reinforcement) conditioning, much of human behaviour was in fact the result of social learning. The individual observes and listens to others and pays attention to what she sees and hears. She encodes those modelled observations symbolically (words, images) so that they can be retained in memory. When motivated to do so, she calls on those encoded models as guidelines for appropriate behaviour. She also learns from experience: she behaves in certain ways, recognizes and thinks about outcomes both expected and unexpected, positive and negative, and makes adjustments regarding future behaviour. She learns because she has the ability to symbolize, to anticipate and form expectations, to think about what she sees around her, to set standards for her own behaviour, and to think about herself and her experience.

Bandura stressed that perceptions and judgments of deviant and dysfunctional behaviour vary according to the norms and beliefs of the group. However, individuals also make self-judgments about whether their behaviour is acceptable or dysfunctional, based on personal assessments and values, thus possibly defining themselves as disturbed even if they are not perceived as such by others in the environment. This, he believed, is generally the result of unachievable self-set standards and fears of possible consequences.

To help individuals overcome fears and achieve behaviour that is acceptable to themselves and to the world they live in, Bandura utilized the behavioural techniques of reinforcement, extinction, conditioning and skills-learning developed by Wolpe, but based on the concept of social learning and observation, he included:

- modelling: the counsellor models the desired behaviour repeatedly to show how it can be done and to demonstrate that consequences which the client fears do not occur; client and counsellor then practice the behaviour together; and finally the client attempts the behaviour herself, first in the safety of the counselling session and then in her real life

Cognitive/ Cognitive-Behavioural

Ellis

Ellis (1961, 1975, 1997) believed that humans, though influenced by biology and environment, can and must take responsibility for their own lives. Humans are naturally happiest, he said, when they set and strive for purposeful goals that fulfil their desires and needs as well as fit with and respect their social world. The crucial variable that mediates between biology/environment and emotions/behaviour is thought. We are born, however, with the potential to be both rational and irrational, and these innate potentials are further developed by social learning. Ellis defines 'rationality' as "that which helps people to achieve their basic goals and purposes" (1997: 4) and 'irrationality' as "that which prevents them from achieving those goals and purposes" (ibid.). The irrational thinking which sets up obstacles to goal achievement is characterized by rigid dogmatic perceptions such as 'I must…', and "You always…'.

Ellis emphasized that absolute thinking did not *necessarily* lead to distress. One could think thus, work hard and confidently, and succeed in achieving what one saw as the absolute; or one could think in absolutes but not to be disturbed by failure to meet that standard, accepting that "the world is highly complex and exists according to laws that are often outside their personal control" (1997: 18). He also stressed that appropriate emotions of disappointment or sadness are healthy, for they are motivators for constructive change. Psychological disturbances result when these dogmatic beliefs and expectations are not fulfilled

and the person, in continuing to hold onto the irrationalities even in the face of contrary evidence, experiences severe or consistent distress because he perceives himself as being a failure, or as let down by others who do not meet the rigid standard he has set.

Ellis' basic framework for understanding a client's maladaptive thinking was a three-part schema: 'activating event' (A), the situation(s) which initiated the problem; 'belief' (B), the clients beliefs about the event (i.e., what it means, what he believes should have happened, etc.); and the 'consequences' (C), the emotions and behaviours that the client experiences as a result of the event and his beliefs about it. The therapist's role is to help the client recognize his faulty thinking patterns, accept that the world will not – and need not – always go the way he would like it to, and learn to refute the dysfunctional beliefs and acquire more constructive thinking patterns. Strategies used to achieve these ends are:

- systematic disputing of the irrational beliefs ("Have you never in your whole life managed to do even one thing right?") and replacing those thoughts with more rational ones
- helping clients to change their language patterns to less absolute and condemnatory language
- humour and exaggeration to develop perspective
- teaching clients to accept themselves unconditionally, complete with flaws
- counsellor as model of self-acceptance, risk-taking, and willingness to be disapproved of
- imagery: visualizing how one would like things to be, for example, or the very worst thing that might happen , with guidance then as to more appropriate thinking and emotions
- role-playing as a way of accessing irrational beliefs, and as rehearsal for more appropriate thinking

- reverse role-playing, with the counsellor taking the role of the client, using the client's style of thinking/talking, as a way of developing insight and perspective
- skills training in areas such as relaxation, communication skills, and the like
- homework assignments such as taking behavioural risks in real life, applying new thinking to specific situations, or systematic desensitization exercises regarding events that produce high anxiety

Berne

Berne (1964) viewed human personality as consisting of three more or less conscious and discrete ego states, which have developed by the age of one:

- the *adult*, which has contact with and control over the outside world, observes and analyses, makes decisions, etc.
- the *child*, which is in touch with emotions and inner goings-on
- the *parent*, which is both the controller and the nurturer, setter of standards for behaviour and caring

The individual's patterns of thinking, acting, and feeling in each state are based on the influences of parental and other significant authorities (in the Parent state); observation, appraisal and realistic judgments (Adult state); and feelings that have their foundation in early childhood when inner experience and emotion were the primary reactions to experience (the Child state). At any specific point or event in the individual's life, one or another of these states is in control of experience.

How each state thinks/acts/feels is based on *scripts* of information recorded in the brain primarily in early childhood: what the child has seen, heard, felt, experienced is retained and forms the subconscious 'instructional tape' for future behaviour, thinking, and feeling. The basic life stances that the child learns from

these scripts are: I'm OK-You're not OK; You're OK-I'm not OK; You're not OK and I'm not OK either; You're OK and I'm OK too. People develop behaviour patterns or 'games' that reinforce and justify these life-positions and which provide the psychological rewards or 'payoffs' necessary to the life-position. The 'we're both OK' position is the healthy balanced state in which few ulterior-motive games are played, and that is the goal of therapy.

The therapist helps clients access and analyse their scripts and their current communication transactions with others which are based on those scripts. In learning to understand their 'tapes' and the purposes and payoffs of their transactions, the client can learn to integrate thoughts, feelings and action in ways that lead to a coordination of behaviour and intent, and which enable the Adult to be appropriately in charge. Strategies used to reach this goal are:

- teaching clients to give themselves and others 'strokes', or the positive reinforcement that enables positive feelings of worth
- structured analysis of transactions using symbolic diagrams
- teaching the use of the specific simple metaphorical language ('parent/adult/child', 'games', 'tapes,' 'strokes', etc.) that leads to understanding and ease of communication between client and therapist and client and self
- contracts to define roles, goals and motivate commitment
- focusing on 'Adult' patterns, rather than Parent or Child ones such as expressing feelings, 'talking things through', and self-justification
- roleplay and dialoguing, as, for example, the client alternately talking in the manner of one ego state to another

Summary: Essentials of Effective Helping

There is an agreed-upon generic model of effective contemporary counselling, founded on the primary theorists, consisting of these essential elements:

- The client-counsellor relationship is of principal importance. The counsellor must be able to generate hope, trust, and belief in the possibility of change in the client. Relationship, however, is most effective when supplemented with knowledge and skills.
- Helping is a three-part process of 1) relationship-building, exploration and assessment; 2) action, involving goal setting, development of goal-attainment interventions, and ongoing evaluation of progress; and 3) termination, involving evaluation of progress and change, reinforcement of change, and preparation for client 'independence'.
- The client is the starting and end point for change. Client perceptions, choice and responsibility, client values and life context, are the basis for intervention.
- Clarification of client and counsellor expectations and roles fosters comfort, trust, motivation and commitment.
- The helping process entails client and counsellor working together, with the client as expert on himself and counsellor as expert in potentially helpful ideas.
- The counsellor must demonstrate nonjudgmental understanding and acceptance of difference (culture, class, value, lifestyle, problem-definition, etc.).
- Development of understanding includes obtaining knowledge about human behaviour and of society.
- The counsellor must have self-awareness of own biases, needs, values, strengths and weaknesses, etc., and have comfort with self.
- Empathy, genuineness, self-disclosure, and respect (including confidentiality) are key in building and maintaining the relationship throughout all stages of the counselling process.

- Sufficient information must be obtained to understand the client situation clearly, and exploration is facilitated by good questioning as well as the above relationship skills.
- Understanding of the past is useful, but focus should be on what can be changed – the present and the future.
- Change is facilitated by identification of clear goals, which are determined by the client with counsellor assistance.
- Varying degrees of directiveness (based on client needs), including suggestions for work between sessions, are necessary to facilitate goal attainment and change.
- Flexibility in the use of theories, skills and intervention strategies is necessary to ensure that client needs are met.
- Observation and perception skills (of client and self) are crucial to all stages of the relationship.
- A focus on client strengths, and belief in client capacity, facilitates change.
- The counsellor is a model of respect for others, good interpersonal skills and comfortable self-acceptance.

All elements are oriented to demonstrating respect, acceptance, and understanding of the client, her perceptions and worldview, and her right and ability to make decisions that fit in her world. Effective counselling is thoroughly client-centred.

The next section examines the requirements for competent counselling with clients from other cultural groups, in order to identify strategies that may be more appropriate than those of the generic approach.

Multicultural Counselling

Multicultural counselling has emerged from the same theoretical and practice roots as conventional counselling, but is seen as distinct from its psychodynamic, cognitive-behavioural and client-centred origins (Pedersen, 1991).

As culturally-appropriate counselling has come to be considered pivotal especially in the last fifteen years or so, the research in this section focuses primarily on the culturally-relevant counselling literature of the past decade. in order to understand what is professed and recommended today.

An overview of the historical and theoretical underpinnings of multicultural counselling is followed by a description of the specific strategies said to be fundamental to culturally-appropriate counselling.

Development of Multicultural Counselling

Out of the U.S. black civil rights movement that started in the 1960s arose overt political and social awareness of oppression, discrimination, and gross inequalities in the treatment not only of blacks but of racial and ethnic minorities generally. Mental health services were not exempt: documentation showed that mental health services to minority groups were inadequate, neglectful, and abusive (Das, 1995, citing Pine, 1972; Sue & McKinney, 1975; Sue ans Sue, 1990; Ridley, 1995) and minority clients were frequently assessed as being 'deficient,' or more severely diagnosed (Pedersen, 1984; Arredondo, 1998; McLeod, 1998). Whereas the civil rights movement, however, was based on a concept of equality that intended to *ignore* racial and cultural differences in the belief that all humans were equal and therefore entitled to the same rights and opportunities (Gutmann, 1994). the current thinking, as we have seen, is that *recognition* of differences is the requisite path to appropriate practice and eradication of discrimination.

In the past three decades, therapeutic professionals have focused considerable attention on research into the cultures of diverse groups, especially those in the West who are seen to be oppressed by and discriminated against by the dominant society, and there is now a large body of literature about the needs of

such minority cultures and the appropriate ways to meet those needs (Sue and Sue, 1990; Pedersen, 1985; Samuda, and Wolfgang, 1984; Ponterotto, Casas, Suzuki & Alexander, 1995; Ho, 1995; Patterson, 1996; and others cited below). The concepts of *different cultures* and *discriminated-against groups* have also expanded: the literature shows that cultural ideology now includes not only the most obvious racial minorities, but all those of non-white and non-Western ethnicity (i.e., not of European – generally Northern European - ancestry), as well as others who have historically faced significant discrimination in the dominant Euro-American society, such as women, those with physical disabilities, and homosexuals both men and women (Bimrose, 1996).

Cross-cultural and multicultural counselling developed as a result of the perception that these different cultures have different value orientations, social norms, beliefs, and family systems, and special problems due to discrimination and oppression. Effective and honourable counselling with members of such groups was therefore seen to necessitate sensitivity to those cultural and discriminatory factors (Corey, Corey & Callanan, 1993; Thompson, 1998; Sue & Sue, 1990; Samuda & Wolfgang, eds., 1985; Poyatos, 1988). Sue and Sue (1990), for example, identify what they consider significant sources of problems in Western counselling:

- individual orientation of counselling vs. group (e.g., family, community) of many other cultures
- focus on guilt in individualistic societies vs. shame in collectivist societies
- importance of direct verbal/emotional/behavioural expressiveness in counselling
- counselling emphasis on insight into underlying causes versus client's need for immediate problem solutions
- insight and thinking about the problems vs. the idea that thinking too much can create problems

- insight seen as sufficient for behavioural change
- the expectation of self-disclosure in counselling (sharing feelings, beliefs and thoughts) with the counsellor, a virtual stranger
- linear rational cause-effect emphasis vs. a holistic intuitive orientation in many cultures
- different concepts of paths to psychological well-being and adjustment (e.g., Third World clients may expect counsellors to provide the same concrete and immediate 'treatment' that priests and doctors do: advice, rituals to be followed, etc.)
- ambiguity in structure and patterns of interaction (e.g., counselling is unstructured, does not provide clear explanations of process, etc.)
- counselling patterns of communication that emphasize client responsibility for initiating conversation

Laungani (1997), as another example, focuses on what he sees as the especially incompatible principles and values of client-centred counselling with East Indian clients, such as equality of client and counsellor rather than counsellor as 'expert'; non-directiveness; and the notions of an unemotional 'working together' and 'contract'. In addition, conventional counselling is said to expect self-disclosure from clients but not from the counsellor, a pattern that is contrary to some other cultures, wherein the person asking for help expects to know something about the helper.

Early influential cross-cultural counselling theories were often based on a highly relativistic viewpoint that minimized the importance of human and cultural universals and stressed the importance of a focus on differences and oppression (Corey, Corey and Callanan, 1993; Wolfgang, 1984). In the last decade especially, this position has been re-evaluated and moderated. An approach that balances cultural awareness, acknowledgement of intracultural diversity, and universals has evolved as the standard (Pedersen, 1991; Locke, 1992; Ibrahim, 1991; Ridley,

Mendoza, Kanitz, Angermeier & Zenk, 1994; Fischer, Jome & Atkinson, 1998a; Arredondo, 1998; D.W. Sue, 1996).

Theories of culture-sensitive counselling fall into two general categories, *emic* and *etic*, terms that come to counselling from linguistics research (for example, Whorf, 1956) via anthropology (Fox, 1997; Marshall, 1998). Anthropological theories were also the foundation for ideas of cultural determinism – that is, the belief that culture, reified, determines personality and reality (Marshall, *ibid.*; Ember and Ember, 1999; Miller, 1999; Scupin, 1995). Although determinist beliefs such as Whorf 's (1956) language-and-culture theory and the conclusions of culture-and-personality anthropologists such as Mead (1963) and Benedict (1960) have been shown to be at best questionable and at times invalid (Marshall, *ibid.*; Freeman, 1996; Payne, 1998; Wierzbicka, 1992; Fishman, 1974; Ember and Ember, *ibid.*; Miller, *ibid.*; Hammond, 1971; Scupin and Decorse, 1995; Howard and Dunaif-Hattis, 1992; Ferraro, 1995), they continue to have influence with some anthropologists, social theorists, and, as we shall see, in cross-cultural counselling.

Emic theories (generally referred to as *cross-cultural* or *intercultural*) are those that focus on being culturally specific. Emic proponents tend to the view that counselling, arising from the white Western dominant culture, will inevitably be ethnocentric, promoting the values and behaviours that are its foundation; counsellors must therefore look to the 'different' culture for appropriate strategies and interventions. The emic approaches of the 1970s and early 1980s had great impact on the field of counselling, for until then, culture had not been a significant consideration (McLeod, 1998; Belkin, 1988; Green, 1982). Emic approaches have, however, been criticized for ignoring intracultural diversity as well as human universals, promoting overgeneralization and stereotyping of both white and the other cultures, and sometimes taking politically-correct stands based on

unscrutinized assumptions and limited population samples (Ho, 1995; Weinrach and Thomas, 1996, 1998; Patterson, 1996).

Etic theories are those that focus on the universals of human cultures (Marshall, 1998; Fox, 1997) and psychological and counselling theory and practice. (The term *transcultural* has sometimes been used for the etic approach.) Eticists like Vontress (1994; and cited by Fischer, Jome and Atkinson, 1998a, and Speight, Myers, Cox and Highlen, 1991), Ho (1995) and Patterson (1996) take the stand that there are similarities and differences between cultures, both of which should be attended to; but that cultures and counselling have universal aspects which are of greater importance than the differences, and which make it possible for a counsellor to work effectively with clients from any culture.

It is not within the scope of this thesis to investigate details of human universals, but the concept is supported by a wide range of anthropological literature, social theorists, and psychological research. Ethnocentrism, ideal versus real behaviour, multiculturalism, intracultural variation, culture change, similar emotions and causes, rational thought, concept of a self separate from others, biological influences, a need to belong – all are components of the human condition.[6]

> Despite immense diversity in behavioristic detail, all cultures are constructed according to a single fundamental plan – the 'universal cultural pattern' as Wissler so aptly termed it…This basis…can only be sought in the fundamental biological and psychological nature of man and in the universal conditions of human experience (Murdock, 1965: 91).

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[6] See, for example, Levi-Strauss, 1966, 1993; Clifford, 1988; Taylor, 1994; Griswold, 1994; Friedman, 1994; Larrain, 1994; Tomlinson; 1997; Kluckhohn, 1962, 1971; Kroeber, 1952; Geertz, 1983; Orso, 1974; Kottak, 1991; Ferraro, 1995; Wurzel, 1988; Hammond; 1971; Macionis, Benoit and Jansson, 1999; Brown; 1991; Wierzbicka, 1992; Wilson, 1998; Krause, 1998.

Etic theory also considers the fact that within each culture there is much variation and diversity among individuals which must be considered, but which can be easily overlooked by a counsellor who is culturocentric. Patterson (1996), Shafi (1998), Ho (1995) and others see Western counselling strategies as being universal enough and flexible enough to adapt to cultural differences, a viewpoint that has led to criticism of the etic approach as Eurocentric and culturally insensitive.

Because of such universal underpinnings, etic theorists contend, it is possible for individuals from different cultures to understand each other on the basis of common human qualities, common social structures, and common human problems.

A renewed acknowledgement of and attention to universals and intragroup diversity in the past 10 years or so has led to revised formulations of culturally-sensitive counselling. The most recent movement is that of *multicultural* counselling, increasingly seen by Pedersen (1991), Essandoh (1996), Corey and Corey (1993) and others as a 'fourth force' separate from the standard psychoanalytic, client-centred, cognitive-behavioural models. The emphasis is on an idiographic perspective, as increased evidence and recognition of intracultural diversity show that factors such as age, gender, education, level of acculturation, and especially socioeconomic status may be more important influences on worldviews, attitudes, and behaviour than the generalized models of external culture (Carter, 1991; Pedersen, 1991; Arredondo, 1998; Fischer *et al.*, 1998b; Ho, 1995). As Ridley, Mendoza, Kanitz, Angermeier and Zenk (1994) demonstrate, "Clients are not merely representatives of a single culture. They participate in aspects of different cultural groups, with each cultural facet overlapping in a unique way to create a blend that is unique to the individual" (128). In order, then, to understand, for example, "Mrs. Clark," an African-American, woman, married,

mother of three children, Baptist, middle-class, living in southern Alabama, the counsellor must look at the unique personal reality that has formed as a result of Mrs. Clark's membership and experiences in all those groups (129). Leigh (1998) states that:

> Each person has a set of cultural techniques derived from the cultural group but screened through the individual's experience in that culture. These techniques may differ from person to person even in the family group. Kracke (1987, 49) reminds us that "Each person experiences similar situations quite differently. Certain situations call for identical responses from all cultural members, but feelings and personal ideas associated with the outward behaviors may differ from person to person, or people may integrate the patterns quite differently into their lives and overall persona." The responsibility of the social worker is to discover and learn from prospective clients their views on their cultural group and how they have responded to the cultural imperatives (30).

Shared race or ethnicity alone, between client and counsellor, does not guarantee effective or appropriate counselling outcomes. (Paniagua, 1994; Sue and Sue, 1990).

Common factors in cultures and individuals are now seen as both obvious and important (Sue and Sue, 1990; D.W. Sue, 1996; Pedersen, 1991; Pedersen and Ivey, 1993). Research has also shown that there are common factors in healing across cultures (Arredondo, 1998; Pedersen, 1991; Fischer *et al.*, 1998a; Egan, 1994; Frank, 1963). Fischer *et al.* cite evidence that it is not specific treatments that lead to successful counselling, but four factors common to all therapeutic approaches (including those in other cultures): the therapeutic relationship; a shared worldview (not that it need be the same, but that helper and client understand each other's); client`s positive expectations; and some ritual and intervention that both believe will be helpful (535-540). McLeod (1998) also

considers research that indicates clients rate non-specific common elements as more helpful than specific techniques. One of these, the relationship between counsellor and client, is frequently cited as the most important variable in successful counselling. In other words, core conditions are said to be the same (Patterson, 1996; Sue and Sue, 1990; Frank and Frank, 1993; Ivey, Ivey and Simek-Morgan, 1997; *et al.*), but each client and context is different. Adaptations are made as to *how* the relationship is built, *how* understanding is attained, *how* hopeful expectations are engendered, and *what* interventions both client and counsellor, working together, choose as helpful.

A concept central to this contemporary model of multicultural counselling is that of *worldview*. Arredondo (1998), Trevino (1996), Locke (1992), D.W. Sue (1996), Ibrahim (1991), Speight *et al.* (1991), McCormick (1998), Pedersen (1991) and others believe that understanding of the client's worldview – and one's own – is the basic framework around which competent multicultural counselling must be based. With the awareness of intracultural diversity, the importance and assessment of worldview is now seen not as culture-specific but as individual-specific.

Kluckhohn and Strodtbeck's 1961 conception of worldview is often cited as a tool for assessing five basic dimensions of worldview: human nature (good, evil, mixed); people/nature relationship (subjugation, harmony, or mastery); time orientation (past, present, future); human activity (being, being-in-becoming, doing); and social relations (lineal/clear lines of authority, collateral/ individual subordinate to group, individualism) (Locke, 1992; Carter, 1991).

Speight *et al.* (1991) have developed a model based on three overlapping spheres that influence the individual. Human universals, individual uniqueness, and cultural specificity overlap to varying degrees to produce a holistic picture of the client.

Trevino's (1996) model suggests that individual worldview, formed out of personal cultural and individual experiences, can be differentiated into general abstract understanding of the world and specific personal perceptions. Constructive change comes out of a combination of counsellor-client congruency and discrepancy: congruency in general worldview promotes empathy and better communication; discrepancy in specific perceptions promotes the exploration of alternative courses of action. The outcome of this kind of change process is that the client's general worldview remains essentially unchanged, but new perceptions and coping strategies will have been added to the client's specific worldview.

Understanding of worldview, then, is said to be the starting point for multicultural competence. This means that client and counsellor must share each other's worldviews to the extent that they *understand* each other, regardless of whether or not they agree.

The multicultural approach seems now to be preferred as it takes into consideration the fact that each culture and all cultures encompass both universals and differences. It combines the emic and etic approaches between and within cultures. Although there is still often emphasis on work with clients who are seen to suffer from racism and oppression, the general consensus is that Pedersen (1991) is correct in saying that *all* counselling is essentially multicultural counselling.

The elements of this multicultural counselling are described below.

Findings: Effective Multicultural Counselling

The counsellor must be aware of her own values and biases, as well as possible racist and ethnocentric attitudes, and be alert to their possible effects in work with the client. She must also be aware that such attitudes may be

unconscious, and should therefore be willing to actively assess her behaviours in order to determine unconscious biases.

She must make an effort to become culturally sensitive. to understand the lifestyles, belief systems, family relationships, etc. of other cultures, especially of the particular client's cultural background. She must be comfortable with and accepting of such differences, regardless of her personal context and beliefs.

She must nevertheless avoid stereotyping, understanding that there is diversity within cultures and that each individual is unique. The client's worldview, perceptions and needs are the result of multiple and varied personal experiences and responses. Though a member of a specific cultural group, his needs and perceptions arise from that unique personal reality. She must acquire the information necessary to understand the client's context.

Interpretations of issues such as what is a problem, and what is normal and acceptable, must be dependent on the client's beliefs and perceptions, rather than the counsellor's beliefs. Such comprehension can be obtained through attentive listening and direct questions. Those aspects of culture that are presented by the client as relevant must be accepted and taken into account.

Her presentation and communication style should 'fit with' the client. For example, she should use language understandable to the client (e.g., not professional or psychological jargon), and determine whether a formal or informal approach is appropriate. Such congruence to the client's context is made possible by close attention to his verbal and non-verbal behaviour.

Attention to non-verbal behaviour is essential during throughout the counselling process, as clients may be uncomfortable or unwilling to communicate disagreement, discomfort, emotions, choices, etc. directly.

Clear explanation of the counselling process to the client, and information about his expectations is necessary. Client understanding is crucial to comfort and trust in the counsellor's ability to help. This explanation and listening is an element of necessary counsellor sensitivity to client needs, as well as in eventual effective development of helpful process and interventions.

The counsellor should have developed a wide repertoire of strategies and interventions, and be flexible in their use. She is thus able to maximize the range of possibly-appropriate choices, and adapt them to fit the needs of the client.

The client lives in a social world that is different from the counsellor's. Community resources and clients' natural support systems must therefore be considered in consideration of interventions.

The counsellor must work together with the client to develop goals and appropriate interventions, rather than imposing directions and directives. The client knows best what fits his needs and life context.

Directiveness and other influencing skills must be adjusted to the needs of the client.

Flexibility about such things as time and location of interview may be necessary in response to client needs. Minority clients who have experienced issues of oppression and coercion, especially, may feel more comfortable in a setting that does not evoke echoes of authority.

Culturally different clients especially may challenge and test, in an effort to evaluate counsellor acceptance and understanding. The counsellor must react honestly and undefensively to such challenge, dealing with it in whatever way is appropriate to the client's need.

These strategies enable the development of an effective working relationship demonstrating sensitivity, caring, trustworthiness and honesty. This relationship is essential if helping is to be effective, contributing to the client's sense of trust, comfort, and belief in the counsellor's ability to help.

Sue and Sue (1990) also recommend that counsellors should not only understand and acknowledge racism and oppression in the society and their effects on minority clients, and be advocates for change, but that they must also be alert to and help clients work through issues and conflicts related to their racial and cultural identity, such as self-hatred resulting from internalized dominant values and attitudes about minority cultures.

Findings: Generic and Multicultural Counselling Compared

A research need that had emerged was to determine whether multicultural counselling offered strategies more appropriate to Inuit clients. It was therefore necessary to compare the elements of conventional and multicultural helping:

Table 3
Comparison of Effective Generic and Multicultural Counselling

Multicultural strategies	*Conventional strategies*
Understand and acknowledge the effects of racism and oppression on minority clients	Gain knowledge and understanding of people, one's community, and society
Develop self-awareness of own racism/ethnocentrism, guilt and defensiveness, cultural and value influences	Develop self-awareness of own prejudices, biases, defences, attitudes, cultural/environmental and value influences
Develop understanding and knowledge about other cultures and cultural influences on individuals	Gain knowledge and understanding of people, one's community, and society
Avoid stereotyping; understand that there is diversity within cultures and each person is unique. Gather information about the individual client's environment and worldview	Accept that each person is unique, and that clients must be perceived in the context of their social world. Gather information about the client's situation.

Table 3 (continued)

Comparison of Effective Generic and Multicultural Counselling

Multicultural strategies	*Conventional strategies*
Accept, value, and be comfortable with differences	Accept, value and be comfortable with differences
Use appropriate verbal and non-verbal styles of communication	Use appropriate verbal and non-verbal styles of communication
Be aware of different possible concepts of normality, problem or acceptability	Determine and accept the client's perceptions of what is acceptable and problematic
Attend to the messages sent by non-verbal behaviour	Attend to the messages sent by non-verbal behaviour …
Use community resources and client's natural support systems in the helping process	Use community resources and client's natural support systems in the helping process
Develop a wide range of strategies and interventions and be flexible in their use	Develop a wide range of strategies and interventionsand be flexible in their use
Be directive according to the needs of the client	Be directive according to the needs of the client
Clearly explain the counselling process and obtain information about the client's expectations	Clearly explain the counselling process and obtain information about the client's expectations
Build a relationship through honesty, self-disclosure, trustworthiness, understanding, respect and acceptance	Build a relationship through honesty, appropriate self-disclosure, trustworthiness, understanding, respect and acceptance
Be open and nondefensive to challenge and testing	Be open and nondefensive to challenge and testing
Perceive the client as basically healthy and capable	Perceive the client as basically healthy and capable
Work together to develop goals and interventions	Work together to develop goals and interventions
Utilize the active listening skills	Utilize the active listening skills
Help minority clients work through issues and conflicts related to their cultural/racial identities	Help clients work through whatever issues and conflicts they wish to deal with
Be flexible about time, place	(Some contemporary authors specify this)
Start with 'where the client is'	Start with 'where the client is'

The comparison reveals no significant differences in client-counsellor relationship, process or strategies. Pedersen in fact says that the " 'complex' counseling behaviours [necessary to identify multiple perspectives within and between individuals] are, on the one hand, rooted in traditional theories of

counseling, and, on the other hand, particularly relevant for multicultural counseling" (1997: 177).

An examination of some examples of ineffective multicultural counselling, culled from counselling texts, may also be enlightening.

Corey, Corey and Callanan (1993) describe a counselling interaction between an Asian client and a white counsellor:

> Stacy, a majority counsellor, is on the staff of a university counselling centre. A Vietnamese student, Lee, is assigned to her because of academic difficulties. She observes that he is slow and deliberate in his conversational style. She immediately signs him up for a class in English as a second language. In the course of their conversations, he discloses that his father is directing him toward a career in medicine, for which he thinks he is not suited. Stacy gives him a homework assignment to confront his father and tell him that he no longer wants to pursue medicine and that he is instead going to follow a direction that appeals to him (247).

The discussion of this interview indicates that this is inappropriate multicultural practice because: 1) his slow speaking style was not necessarily an indication of a need for English classes, and Stacy had acted hastily and insensitively; 2) Stacy's confrontation assignment revealed a lack of respect for the family hierarchy and roles, and the values and beliefs of the client's environment; 3) her assessment was too hasty, based on insufficient information, especially considering that he had been sent to the counselling centre rather than coming voluntarily (248).

This is an example of ineffective multicultural counselling. *More significantly*, it is an example of simply very incompetent – indeed, potentially harmful – counselling. A competent *generic* counsellor would not immediately take any action or make any assumptions, such as a need for English upgrading or

that Lee's father's directiveness is a problem for Lee. The first area to explore, in fact, would be simply the academic difficulties, for this was the presenting problem that led to referral. Start where the client is, and that start would include an explanation of why he has been referred, and opportunity for Lee to explain his perceptions. If necessary, the counsellor would gather more information about his wants and needs, expectations and life context. The counsellor alone would not set any goals or develop any strategies (e.g., homework assignments): she would explore a variety of options, explaining and discussing them with Lee, and allow him to decide what would be necessary and appropriate for his situation.

Sue and Sue (1990) present a transcript involving trust and testing between a black client and a white counsellor:

> BLACK FEMALE CLIENT: Students in my drama class expect me to laugh when they do 'steppin fetchin' [sic] routines and tell Black jokes…I'm wondering whether you've ever laughed at any of those jokes.
>
> WHITE MALE COUNSELOR: [long pause] Yes, I'm sure I have. Have you ever laughed at any White jokes?
>
> BLACK CLIENT: What's a White joke?
>
> WHITE COUNSELOR: I don't know [nervous laughter]; I suppose one making fun of Whites. Look, I'm Irish. Have you ever laughed at Irish jokes?
>
> BLACK CLIENT: People tell me many jokes, but I don't laugh at racial jokes. I feel we're all minorities and should respect each other. (90-91).

Sue and Sue point out that the counsellor was correct to admit the truth, that he had laughed. "The client's motivation for asking the question was a) to find out how sincere and open the counselor was, and b) whether the counsellor could

recognize his racist attitudes without letting it interfere with counseling" (91). The counsellor, however, destroyed the possibility of trust by becoming defensive and "trying to get the client to admit to similar actions" (*ibid.*). Again, counsellor defensiveness, argument and attacks, however mild, on clients are unacceptable behaviour in any counselling situation. An effective conventional counsellor too would have simply admitted his laughter and then explored the issue further if the client indicated it was necessary.

Alladin (1999: 94) illustrates "the unwitting clash of concepts" between Western counselling and a non-Western client in the following description:

> 'I'll have to talk to my brother,' the female Pakistani graduate student told the female American counsellor. 'I can't decide what to do until I talk to him.' She was married and her husband was abusing her. He hit her, reviled her, and on at least one occasion burned her with his cigarette. Friends had encouraged her to see the counsellor. Her older brother was a post-doctoral researcher at an Ivy League institution. It was his guidance she said she needed.
>
> The counsellor saw the problem right away. Here was a woman unable to make up her own mind. She needed to assert herself. It was her life, not her brother's. The counsellor explained that the Pakistani woman needed to take responsibility for her own decisions. The Pakistani woman left the counselling session and never saw the counsellor again.

Alladin points out the following factors as examples of Western counselling's inappropriateness:

- it was premature to ask the Pakistani woman to assert herself, not that the assertion *per se* is inappropriate
- it also cannot be assumed that the Pakistani woman was incapable of asserting herself, for she may have assertive skills in her repertoire but has not yet decided to use them

- the notion that it was 'her life and not her brother's' illustrates the problem that Laungani (1997) has highlighted about imposing an individual or client centred approach on ethnic minorities
- the notion that anyone who is at least 18 years is an adult in law does not automatically mean that responsibility for making important decisions should be taken by the person alone. For the Pakistani woman, her elder brother is a person to be respected and consulted before a major decision is made.

Again, it is clear that this was an incompetent counsellor. The effective conventional Western counsellor does not make assumptions, does not make interpretations before gathering sufficient information about the client's views/needs/life context, does not tell clients what they must do.

In addition, Alladin's discussion is an important example of how the concept of 'client-centred counselling' has at times become confused. As we have seen, it does *not* mean that the client is expected to base behaviour and decisions on a purely autonomous, individualistic 'I'-focused foundation. As is evident in the exploration above, even Rogers' original client-centred counselling stressed that counsellor attention be paid to all aspects of the client's beliefs, values, life orientation, social context, wishes and needs, as they are perceived *by the client*, and that the client be allowed to choose paths that she feels fit into that life context.

Finally, Leigh (1998: 139) gives examples of behaviours that are said to be inappropriate when working with Native American clients:

> Lafromboise and Dixon (1981, 136) state that nontrustworthy interventions by the social worker working with Native Americans can be illustrated by the following:
>
> - abrupt shifts of topics
> - inaccurate paraphrases

- mood changes and interest changes
- break in confidentiality
- stereotyped statements
- broken promises

Each of these actions by the social worker in the interview is not culturally congruent to the person and will affect their ability to form a beneficial relationship.

Leigh's list of actions "not culturally congruent" is simply unconscionable counselling. A white middle-class client's ability "to form a beneficial relationship" would be equally affected by such gross inattention and disrespect.

The examples demonstrate what seems to be consistently evident in the literature: ineffective multicultural counselling is in fact ineffective counselling. Nowhere was I able to find examples in which the effective generic counsellor strategies were demonstrated as being inappropriate. Nowhere was I able to find examples which showed a *competent* generic counsellor as being inappropriate. An example of incompetent counselling can only be proof of the inappropriateness/ineffectiveness of incompetent counselling.

Summary

Multicultural counselling is simply effective generic counselling. The values, structure, conditions of relationship, process, skills, and strategies are those of the generic model. The emphasis on client-centredness is the same: attending to the client and his context, and adjusting counsellor behaviours/interventions to fit with client perceptions, needs and preferences. The difference seems to lie in the training emphasis: in addition to learning the generic skills, multicultural advocates stress an added component of practice in identifying and working with differences.

The literature and concepts, whether conventional or multicultural, have however been developed by Western – or Westernized, in terms of education and

profession – writers and practitioners. It is possible, then, that the examination of traditional helping as described by traditional Inuit themselves, speaking not as clients but as people simply living and reflecting on their lives, will reveal significant differences in outlook and practice, and strategies that are indeed different from any we have seen thus far. Aspects of conventional counselling may, on the other hand, prove to be compatible with traditional practices. That too needs to be known and acknowledged, for to ignore any helpful factors is to do a disservice to clients.

Chapter 5: The Inuit Voices

The Elders' Interviews

Introduction

The elders' interviews provide extensive information about Inuit traditional life and beliefs, through both direct statements and explanations, and indirectly through descriptions of behaviour. I have organized that information as recommended by Gilmore (1980), and analysed the resulting data so as to present a coherent view of helping strategies and their underpinnings.

It is important to note that Inuit were not – are not – a homogeneous group. The Hon. Manitok Thompson, Minister of Public Works, Telecommunications and Technical Services for Nunavut, points out that there was and is much intra-Inuit diversity:

> We do have differing cultures in Kitikmeot, Baffin and Kivallik. There are also subcultures, Paaliqmiut, Natilingmiut as well. The differences in cultures of these people, when we are talking about them, sometimes there are disagreements about what is Inuit. Some of the elders may believe that this is a true Inuit way but because of the differences in culture, they differ in opinion (Government of Nunavut Legislative Assembly, 1999: 73-1[2]).

Practices, beliefs and behaviour varied among and within groups, as is evident in the interviews. Virtually all aspects of behaviour – rules about naming, communication patterns, refraining rules, and so on – had many variations. I shall therefore base my conclusions on the common patterns which these elders agree upon – understanding too, as they themselves stress, that their own generalizations

are based on their personal experiences, and that their ideas and behaviour have inevitably been influenced by change and new learning.

I will note again that the interview transcripts describe a multitude of beliefs and practices in many areas of life. The purpose of this inquiry is not to develop a comprehensive analysis of all aspects of traditional Inuit life, nor is that possible in one thesis. I have therefore focused on only those aspects which seemed relevant to an understanding of the practice of personal helping.

Findings

Philosophical Underpinnings of Helping

Gilmore (1980) states that the values of a group may not be explicitly stated, but are revealed in such aspects as behaviour, expectations, and rationales. That is demonstrated in this analysis, wherein many beliefs, philosophy and values emerge in the discussions of experience and reasoning. Thus no one states explicitly, for example, that "We Inuit are a pragmatic people," but that pragmatism is demonstrated in all explanations of why one should act in certain ways, or all descriptions of continually adapting new materials and ideas that would enhance life.

All human groups have explicit and implicit theories and assumptions about the nature of the world and reality, the nature of knowledge and its acquisition, and concepts of ideal human behaviour. Such conceptions form the necessary foundation of human life in practice, be they consciously reflected on or simply unconsciously assumed as truth. They provide explanations for the unknown and the unknowable, rationales and guidelines for surviving both in the

natural environment and with each other, and strategies for learning what is needed for that survival.

These philosophical foundations grow out of human experience and human reflection on that experience. While in some ways we are prisoners of our conceptions, our worldviews are not static. New experience produces new knowledge and new questions, and thus new answers and possibilities. But past is neither forgotten nor thrown aside. The Inuit experiences of Christianity or formal education, for example, resulted in new forms and beliefs of spirituality and acquisition of knowledge, but the desire is evident that what is seen as valuable or factual from the past be integrated into current beliefs, behaviour and perceptions.

The elders' discussions illuminate what they consider the necessary framework of a successful life, as well as their beliefs about the nature of human beings as they strive to attain this successful life.

The Nature of Life and Reality

The elders who speak in these interviews present a conception of life that is fundamentally pragmatic, a worldview defined by Marshall (1998) as one "in which a truth is appraised in terms of its consequences and use value…a down-to-earth philosophy which seeks to unify intelligent thought and logical method with practical actions and appeals to experience" (521). These elders indicate that rather than being based on an abstract philosophical system, traditional perceptions of truth and reality were grounded in dynamic, non-static concrete experience, wherein action, attitude and meaning came from an assessment of experience and practical consequences. Repeatedly, all the elders' statements reflect the belief that truth and reality can vary according to circumstance, context and experience; that action and thought must be rationally oriented to future consequence; that the world, including nature, can be predicted and controlled by objective analysis of

facts and resultant logical action. They describe how experience was, and should be, constantly assessed and interpreted according to what was known both personally and from the known experience of others (including those in the past). As Aalasi tells the students when they describe having heard something different from another elder:

> We have different knowledge, depending on the areas we come from. Keep this information. Don't dismiss it. You gain knowledge from everything you hear…Keep the information from both interviews and use what you feel is useful (Health: 150).

They describe too how adaptations are necessary and beneficial in life, be it in material aspects, actions, or beliefs, as circumstances change or new information and material becomes available. A successful life necessitated conscious consideration of the future, and both past and new experience were constantly incorporated into this assessment. Thus, for example, Imaruittuq explains that though some elders were upset about arguments about wildlife (disrespect to animals) during land claim negotiations, this was a necessary process if Inuit were to reach their goal:

> When we started dealing with the land claims we had to talk a lot about wildlife. This created a lot of fear amongst the elders. They used to tell us not to quarrel about wildlife because this was a very dangerous thing to do. We explained to them that we had to quarrel about wildlife because we were negotiating with the *qallunaat* [non-Inuit] and this was a *qallunaat* process. We explained that we were legitimately negotiating over the wildlife (Law: 38).

Events in an individual's physical or social environment prompted behaviour and change. Thus Inuit, individually and as a group, adapted their behaviour and beliefs as circumstances and knowledge changed. As Elisapee,

Tirisi and Tipuula emphasize when describing traditional health and medicine practices, "We were always looking for better things."

I noted with interest a point made by Victor when discussing his conversion to Christianity from his shaman life, and which is echoed by some other informants. He had had an experience that convinced him God was more powerful than his shaman helper spirits, and so he gave up his spirits and would not return to that life. But when asked what his thoughts are now about having been a shaman, he replies, "It was real for me. It was true for me. I knew it to be of help to me" (Transition to Christianity: 80). That is: things change, better ways may be found, but the past too is real, and is not to be denied or discounted. Aupilaarjuk expresses a common belief that old and new ways should come together for the best possible life:

> Today people who have been to school understand these rules [white customs and morals] but they don't know Inuit values and morals and customs…[If] They know *qallunaatitut* [English and white ways] and if they also know the way of the Inuit they will be much stronger people. Family and spiritual life will be strengthened…I think we should be joining together the good parts of *qallunaat* [non-Inuit]and Inuit ways (Law: 27).

All elders present a picture of humans actively involved in the making of their lives. Bernstein (1979: 144) asserts that life is a constant series of conscious meaningful acts related to a 'project'. In a harsh climate with few material resources survival was the ultimate project, and the elders' discussions make clear that they long ago understood what Bernstein says today. Tipuula says, "Our mind, our heart and our hands are the most important parts. We have to keep active all the time, especially our minds. Before I go to sleep, I think about the things I will do when I wake up" (Health:81). Laziness was frowned upon. "We were told not to sleep in," Uqsuralik says. "We never used to say, 'I'll do it later.' Whenever a

thing needed to be done, we would do it right away" (Childrearing: 32). Negative circumstances and feelings could be changed by consciously changing behaviour and attitude. Victor tells of his initial distress when people did not believe him about giving up shamanism and turning to Christianity: "Yes, it is very hard for a person. It causes one to be depressed. Then I thought, if they want to say this about me, let them. I didn't let it bother me" (Transition to Christianity: 113). Positive consequences could be guaranteed by conscious action: everyone involved in a birth undid their *kamiik* [sealskin boots] laces, "otherwise the umbilical cord could wrap around the [baby's] neck" (Naqi, Childrearing: 32). They emphasize this importance of *purposeful action* in life. Saullu says, "One who just sits around tends to grow old faster. That is why we were told to be mobile and energetic" (Introduction: 88), and Akisu, in speaking of medical practices, explains that, "Everything was done for a purpose" (Health: 211).

The world consisted of both the seen and the unseen, the observable physical world and spirits. But even the spirits and supernatural forces could be actively dealt with – human existence was not at the mercy of these forces, not fatalistically determined, as is evident in all the old beliefs about the spirit world. Nutaraaluk (Law: 88-90), for example, recounts a variation of a legend about a shaman who brings back sea-mammals in a time of hunger by diving into the sea to meet with Sedna, the spirit-woman of the sea who controlled the sea-animals. If humans were abusive towards animals, they would flee to Sedna's shed. In addition, whenever people broke taboos, caribou hair fell into the water, and this hair would eventually plug up Sedna's ears. She, being both angry and deafened, would not hear the people crying out to her to release the animals, and the shaman would have to go down and arrange to remove the hair. In return, she would release the animals.

It is clear that to the elders life was not passive. As discussed above, Inuit *did*, constantly and consciously, rather than waited to be done to, and that action was based on assessment of circumstances. In discussions about trying to heal illness, Aalasi says, "My mother used to try anything" (Health: 147). Even taboos had not been imposed as some abstract matrix for behaviour, but as Elisapee explains, consciously and empirically developed by shamans as a way of trying to prevent or change threatening situations: "They would look for different ways to help. They would think: 'Maybe we should do this and refrain from doing that.' That is how the *pittailiniq* [taboos] were created" (Health: 126). In shamanism, "It was not as if they were following Satan. They were searching for a means of control" (128).

And those things that could not be changed were to be accepted. But acceptance, too, was not a passive fatalism. It was an active and rational acknowledgement of facts. One first attempted to change a situation if there was an indication that change might be possible. When things were known to be unchangeable, one simply accepted it and carried on with life. If necessary, new ways to continue must be found, or new attitudes developed. Blame or brooding or anger or withdrawal or complaining were discouraged. Saullu talks of delivering babies and though knowing the pain the mother was having, "…I told them that even if they cry it won't help, because there is no other way around it" (Introduction: 78). Acceptance of the inevitability of difficult situations in life was instilled early, to prepare children for the future. For example, Tipuula and Elisapee describe examples of such childhood preparation, being asked to get up in the middle of the night to do chores, boys especially being made to endure cold and hunger, etc.:

> Tipuula: …they were helping us to prepare for our future.
>
> Elisapee: We were given tasks that were difficult so that we

> would be experienced by the time we got married, so that in times of hunger we would survive (Health: 56)

Each and every one of the elders constantly stresses the importance of personal experience as the ultimate arbiter of reality and truth. Repeatedly, they strive to make it clear that all they can share with the students is that which is based on what they have seen or experienced. Repeatedly, they emphasize that they cannot make definitive statements about things of which they have no personal experience, nor vouch for the verity of something they have merely heard about. "Based on my own experience, I knew..." Rachel says. Repeatedly, they explain that they know something is true because they have experienced it. Victor, although he had been a shaman, feels unable to give any information about *tarriasuit* [invisible 'shadow people'] because he has never experienced them: "I have heard of *tarrasuit*, but I have never seen them...I've never experienced it, so I can't tell you about it. I don't want to tell you something I don't know about" (Transition to Christianity: 118). Pauloosie, when asked about relationships between Inuit women and whalers, qualifies his belief: "It is something I only heard about. I didn't see it, but I think what has been said is the truth" (Introduction: 98). Aalasi, talking about the effects of the full moon, states, "I did not believe what the elder had told me [that the ends of hair split open at the full moon] so I checked out my hair and it was true" (Health: 206). Saullu states clearly that, "I can be asked what I know. I state only what I know" (Introduction: 65).

Despite this highly phenomenological outlook, however, they also make clear that personal perceptions and interpretations of reality are influenced by the knowledge and interpretations of significant others, past or present. Thus Imaruittuq comes to understand the truth of his mother's teachings through personal experiences years later (see below). And Aupilaarjuk explains that if you have not been told about rules or abstentions, "Certainly, if you don't know about

this, it won't have the same effect on you. If you don't know about this, you can just laugh about this. But if you are aware of this, it is very scary, and can have serious consequences" (Law: 17). They recognize that understanding of the world and ourselves, and the beliefs and behaviours that thus arise, are based on both personal and social foundations. We interpret phenomena according to the influence of both our own and others' experience.

The elders' conversations demonstrate that meaning was constructed from an interaction of observation and reflection, arising as a result of the interaction of the individual in his environment trying to make sense of the 'what/why/how/when/who' questions of life. Thus, for example, a dearth of animals has meaning which leads to interactional behaviour that has meaning which leads to action that has meaning: We are in danger of starvation. Why is this happening? Who is responsible? What can we do to change the situation? The meaning of 'starvation because there is no game' is that someone has broken a rule. A meeting and discussion among community members and the shaman helps to pinpoint the wrongdoer. The wrongdoer's acknowledgement of rule-breaking and his act of confession means that there will be a resolution: the animals will return. Implicit was the understanding of the necessity of assessment and analysis, communication and interaction, a rationalization of cause and effect, and the belief that a conscious meaningful act (confession of wrongdoing) could exert control over the natural environment. The words 'make sense' crop up frequently, as when Aupilaarjuk speaks reluctantly – that is, modestly – about his younger brother having probably inherited some shamanistic abilities through being named after a powerful shaman: "But his knowledge, the way he puts words together, and his dreams, all make sense. You can tell that there were abilities that were passed on to him" (Cosmology: 15).

Successful survival depended on this ability to make sense of, classify and organize, give meaning to, explain, identify cause and effect of, and predict both natural phenomena and human behaviour. As with all humans, reasoning may be specious or fallacious, but by nature we seek to order, to explain, to justify, to understand and be understood, in order that we may outwit or evade those things that could destroy us, and accomplish those things which are necessary for a successful life. Leena Evic, an Inuit woman who successfully straddles both the traditional and the modern worlds, explained to me that she is able to hunt – to kill the animal – because as an Inuit she believes that the animal offers itself up to the human. In return, as the elders state repeatedly, humans are expected to respect animals in order that the animals will continue to provide themselves as food. Pauloosie recalls that, "…animals tended to come around if you were a hunter, probably based on how willing you were to catch game" (Introduction: 121). But making fun of them, mistreatment or unjustified killing would cause the animals to disappear or to take revenge. Imaruittuq explains:

> From the time we were small we were taught to have the highest respect for all wildlife, even the smallest bird…If we didn't do this they could take revenge on us…There is a story about a man who shot a caribou in the leg, disabling it. The wounded caribou was still alive when he cut off its nose because he wanted to eat it. As a result of this, later in his life his nose became decayed and it fell off (Law: 39).

There is in this belief a complex rationale for the necessity of killing and the relationship of man to animal. The reasoning may not be considered 'true' in a modern Western scientific sense, but is nevertheless a rational way of explaining and making sense of the world and of humans' needs and behaviour in it.

All elders stressed the importance and inevitability of communication. Knowledge, feelings, attitudes, beliefs, history, etc. are passed on through language and non-verbal behaviour. Painful emotions are released, problems are solved and

understanding obtained through communication. "People go through healing today to get rid of their pain," Elisapee explains:

> They talk about the bad things they have done, admitting they're sorry and seeking forgiveness, letting go of their wrongdoings...It has been practiced since the beginning of time. They used to be told by the elders to make sure they admitted anything they did so they would not end up being ill (Introduction: 59).

Potential problems are avoided by open and honest discussion. Rachel and Victor discuss the need to express even critical thoughts to family members:

> Rachel: If you don't say something to them, then you will just not have expressed your thoughts... When we Inuit have someone we love, and we find their actions inappropriate, we need to tell them this. If we don't say something to them, that's not really love.
>
> Victor: Yes, I find it that way too (Transition to Christianity: 26).

Imaruittuq, Akisu and Nutaraaluk emphasize that even camp leaders or older people must be questioned if one thought their behaviours or decisions were bad ones:

> Imaruittuq: Even the *isumataq* [leader] was treated the same...If I was distributing meat and discriminated against...another who was less fortunate, I would be counselled, even though I had a very high profile in the community...[and] If a person who is older is making a decision and you think it is wrong, you have the obligation to tell them that.
>
> Akisu: If you think that someone who is older is doing something wrong, you shouldn't just think about this, you should tell them this directly, especially when there is danger involved (Law: 50).

And all echo variations of the belief that expectations and the reasons for them must always be explained, calmly and clearly, whoever the person, whatever the situation. As Uqsuralik explains regarding discipline of children, "When they calm down and you see that they are happy then that's the time to talk to them about what they did...We just tell them honestly, 'If you do that, people are going to be bad to you, they are going to retaliate against you'" (Childrearing: 52).

As well, the elders were taught to look constantly to the future – sometimes far into the future – trying to anticipate and predict what might happen, and thus plan accordingly. Past experience, stories and legends were seen as guidelines for a successful future rather than simply as rigid templates for 'this is what must be done because this is what we have always done'. Stories could pass on helpful information about good hunting places, or how to survive mishaps. But Imaruittuq, when asked if the purpose of stories that had been passed on from generation to generation was to help people live better lives, replies:

> No, they didn't necessarily make someone live a better life. They made each one of us think, made us think hard. For example, the story of Kaugjagjuk tries to make you think. The mistreated child would make you think, as would the story of the grizzly bear (Law: 179).[7]

The elders discussions clearly demonstrate a belief that behaviour and beliefs are relativistic, varying according to situation, personal knowledge, context, group composition, customs, etc. Intragroup as well as intergroup (whether between Inuit-Inuit groups or between Inuit and non-Inuit) differences are acknowledged as inevitable and natural, as is the understanding that different circumstances demand different responses and adaptations. Everyone at various

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[7] It is notable that Inuit stories and legends generally have no clearly-stated moral or message. Stories describe an event, but it seems always to be left to the listener to decipher meaning and message.

times emphasizes that customs differed, as Jaikku says when told of a birth practice she has not experienced: "That is not how it worked in our community" (Health: 186). And Elisapee expresses the elders' view when she explains to the interviewing students that though questioning elders can still be considered disrespectful by both young and old, this is not true in all circumstances: "You shouldn't be wary of asking us any questions as we are not at home" (Introduction: 16). This was a different situation, allowing different behaviour.

Personal responsibility and control seem to have been central themes in their traditional lives. The elders' statements indicate that although they and their ancestors understood that human life and action are, of course, affected and at times determined by external forces, they believed that individual personality, responsibility, decisions, and conscious action shape life and environment to a great extent. They believe that each person has the capacity – and the personal responsibility – to learn, to think about their goals, actions, and consequences, and to act in ways that lead to positive outcomes for themselves and, when necessary, for the group – and that different circumstances require different analyses and action. Control of nature was necessary for survival, and such control was possible through the observation of rules and taboos. Negative emotions and interpersonal problems, which could be detrimental to both the individual and the group, could be controlled by personal behaviour and attitude: that is, by talking about problems, changing one's thoughts, assessment and reflection. Danger and potential danger could be forestalled or lessened by knowledge, forethought and anticipation, competence and rational decision-making. Group needs could be met by individual competence and willingness to work, by action based on a rationale, by cooperation when necessary, and by a practical ethical foundation whose basic premise was that if you behave well, others will behave well to you, and you will

live a long life. Without knowledge, responsibility and control. one was a victim of circumstance.

How *do* we know? How do we acquire knowledge? The next section describes the epistemological underpinnings of the elders' traditional life, as manifested in the interviews.

Epistemology

As discussed above, the elders stressed repeatedly that one can only really know what one experiences. Their statements make clear, however, that they believed that the knowledge which is created from experience has two foundations. Experience comes through the senses: one sees, hears, touches, tastes, smells. This sensory knowledge, however, is then interpreted. One makes sense of the knowledge through experimentation, reflection and analysis, previous experience and the explanations of significant others. Jaikku explains about remedies for illness: "We found out what worked through experimentation. Everybody relies on doctors now. Back then we experimented with different things to find out what was effective" (Health: 209). Although generally learning was acquired through observation and personal experience, Imaruittuq explains:

> If my father knew I was not going to experience something personally, he would describe scenarios to me so I would still know about it. For example, how certain animals were hunted, what to do when the weather was bad or how to do things to survive. My father would tell me about things occasionally but it was my mother who constantly talked to me about how to conduct my life…Long afterwards when I would experience something along the lines of what I had been told, I realized that she had told me things based on truth (Law: 84).

They also explain, however, that one cannot assume or necessarily believe that something is true just because someone else says so. It may be necessary to rely on one's own experience in order to know, as Uqsuralik explains in a discussion of children telling tales: "They listen to others outside the family. We should tell them that what they heard may not be true. You condition them to think there is a possibility it might not be true" (Childrearing: 54). Validity of knowledge tends to be evaluated by these elders on the basis of 'I have seen this,' 'I have experienced this,' or 'I believe this is true because I have experienced it, but I am not saying it is true for everyone'. Others did and may have different experiences leading to different knowledge, beliefs, and practices. And many of the elders qualify their statements if they are unable to provide empirical proof. For example, when Aupilaarjuk is asked if the shaman's helper spirits had a hierarchy of power, he affirms it, with a reservation: "Yes. There was very much a hierarchical level. I can't see them so I might be wrong" (Cosmology: 44).

Interestingly, they also state that one could know something, for example through legends and stories, but that sometimes the thing one 'knew' was not true. That is, not everything that was believed was necessarily true: something which was known and believed to be true could be understood at the same time to be factually or objectively *untrue*. Elisapee explains about a belief that ermine can enter into others' bodies through the anus: "They say that muskoxen form a circle with their behinds inside to prevent ermines from entering their anuses! This is not really true, but it seems like a good explanation" (Health:44). As well, some beliefs were not always serious, or were just 'made up' by someone and copied by others. A student asks Tipuula and Elisapee if it is true that if the mouth is twitching, it means someone is talking about you:

> Tipuula: That is just a saying…These signs are not always serious.

> Elisapee: When someone had a twitch and said something was going to happen, when others had a twitch they would also think the same thing would happen to them. The ones who had signs were copied. If a baby that was not able to talk yet said *uquuquuq* when his father was preparing to go out hunting, that would be good luck. If the child said *uquuquuq* the hunter would catch something (Health:143).

It was also understood that sometimes people simply wanted to believe something, as Aalasi replies when she is asked if people believed in a certain prediction game, "I guess because we wanted it to be true, we believed in it" (Health). Others explain that some things that were known to be true in the far past no longer are, as can be seen in Imaruittuq's explanation about stories which tell of animals taking human form: "A long time ago, we heard that they turned into humans. This no longer happens in this day and age" (Law: 196). And Aupulaarjuk points out that even procedures known to be true and effective must sometimes be questioned: "I too know about *qilaniq* [a method of identifying causes of problems, explained below]. One shouldn't always believe what they find out during *qilaniq* for the answer being given might not be the truth" (Law: 21).

Aupilaarjuk also discusses the difference between belief and knowledge when he explains his quest to understand the nature of the *tarniq* [soul]:

> As an Inuk, I cannot tell you anything other than what I have already told you about the *tarniq*. The *tarniq* does not have bones. It is like a bubble. It is the reason why we are alive. Our body has skin and bones. That's why I'm asking you, as people who have learned *qallunaatitut* [English] …Inuit education seems limited, but you have access to massive resources and materials available on this….
>
> (A student replies): My understanding is that the tarniq is part of us. It helps us and assists us. When a physical being dies, it will leave the body.
>
> That's how Inuit think, but is it part of the body or is it

> separate?... In Nattilik we say the same thing, that our *tarniq* leaves the physical being but my question is. what does the *tarniq* look like, what is the shape? For example. when we see this audio tape recorder, that's the shape of the audio tape recorder. We can tell that this is a recording machine, you can see it. It is different. What I want to know is if the *tarniq* and our physical being are different. We believe it to be so, because we haven't seen it. Therefore we haven't understood it. This is not knowledge, but what we believe (Cosmology, unedited transcripts, Session 12).

Of interest is the fact that acquisition of knowledge for children did not generally involve the interactive process of child-adult question-and-answer. The elders all state that children were not to ask questions, nor were they to listen to adult conversations except in certain acceptable situations like story-telling of wildlife, myths and legends. Although there were individual and family variations, all the elders stated that childhood learning came primarily through observation and listening, attention to adult behaviour, attention to statements that implied certain values and accepted ways of being/doing, and personal trial and error (experimentation and practice), rather than through questioning and specific adult demonstrations or explanations. Saullu explains how she learned about delivering babies: "Before I was an adult, I used to be present at births. I didn't think I was learning from them. That is how I learnt" (Introduction: 73). And Pauloosie explains how he learned to run a dogteam and taught his sons the same:

> Our learning took place when we went along on trips...Women also learned by observing their mothers...They didn't go through formal education, but learned through observing and watching. We as men learned more about what men do, and the women learned more about what women do, that way (Introduction: 121).

Children, like children everywhere, also learned through play. Rocks in parka hoods became babies, seal flipper bones became dogteams, pieces of antler became harpoons.

Individual initiative and curiosity also seem to have been an important component of acquiring knowledge, according to all elders. Elisapee says that in fact sometimes there were pragmatic obstacles to learning, but they found ways:

> We were not told directly how to sew. Our mothers and our grandmothers would say we could not do it, so we used scraps and sewed them. Even then, they wanted to do it instead, out of fear that the needle might get lost. Sometimes, when we asked again, we would be given materials…We would practice softening skin, even if we weren't asked to do it. I think we started working with scraps. I am sure our mothers didn't have the time to teach as they were constantly busy. I am sure we practiced sewing, even though our work wasn't noticed at first, and we were really keen on finishing it (Introduction: 19).

Saullu tells of learning to read Inuktitut: "I taught myself, by looking at letters. They used to get mail only, because they didn't have phones in the settlements. I would read the name in Inuktitut" (Introduction: 66).

Tipuula and Elisapee explain that in fact children were encouraged from a very young age to learn about life through experience:

> Elisapee: The child is not really making a mistake because it makes sense to them.
>
> Tipuula: Children eventually find things out on their own…from their surroundings. We should not try to make them do things. We should not try and stop them from doing new things. Of course we will not let them do something if it is dangerous (Health: 84-85).

The acquisition of knowledge was, for the groups these elders lived in, primarily an active, social, conscious process involving empirical observation of self, others and phenomena; practice and experimentation; initiative, and cognitive reflection about observations and experience – one's own and that of others.

All the elders agree, however, as Imaruittuq commented, that "maybe they should have let us listen more" and ask more questions, for they might then have received more information and a wider range of knowledge than came from purely personal experience. "And we would be told not to listen while people were talking. For that reason we have less information than we would otherwise have," Paniaq says (Introduction: 47). Thus, they encouraged the student interviewers to ask questions, and expressed the desire that young people today come to them for information and explanation.

Concepts of right and wrong, good and bad, were also pragmatic, and such knowledge was again often acquired through observation of and reflection on experience. Values of 'right life' seem to have been based on a practical assessment of behaviour and consequences, and socialization to such values occurred through stories and legends, parental admonishments regarding the consequences of behaviour, and the interpretations of action. The next section discusses the ethical foundations of the elders' lives and the values that were considered essential to a successful life.

Ethics and Values

Values can be generally defined as "people's preferences and priorities, their beliefs about duty, about right and wrong, about what is ugly or beautiful, and about what ought to be done in certain situations" (Spencer, 1990: 20). An abstract concept, values may not always be explicitly declared, but are evident and implied in the expectations, sanctions and explanations of behaviour, and in legends and stories. As Imaruittuq explains about a specific old story, "I think the meaning of that story is that…you cannot abuse an orphan and treat them terribly. You have to treat everyone respectfully" (Law: 187). 'Ethics' refers to the moral obligations and behaviour that arise from the values regarding right and wrong – "moral

principles that govern a person's behaviour or the conducting of an activity" (Oxford Modern English Dictionary: 631).

The traditional values and the ideas of ethical behaviour seem, in these elders' lives, to have been based on the very practical necessities of life in a harsh and unforgiving environment, rather than on abstract philosophical notions of 'goodness' or 'badness'. In fact, I do not get a sense of judgment based on such abstractions anywhere in the interviews. Behaviour seems to have been seen as beneficial or necessary and thus right, or detrimental or dangerous and thus wrong, rather than being judged as somehow intrinsically 'good' or 'bad'. Aupilaarjuk says, for example, that murder was a much more serious crime than stealing, for "There was always the possibility that someone would avenge the murder" (Law: 30), or, as Akisu and Imaruittuq explain, that the murderer will do it again, thus becoming "a threat to the community for the rest of his life" (Law: 53).

The actions of an individual cannot generally be judged, the elders say, but must be considered according to context: behaviour arises out of personal circumstances and must be looked at according to that situation, as well as according to its consequences to the group. Paniaq and Elisapee for example, tell about a case of cannibalism where Paniaq's grandmother's husband and children died of starvation but she survived by consuming their bodies until she was found. Paniaq explains that her actions were the only way she could have survived and must be looked at in that context: "This woman had gone through an extremely difficult experience…an experience that no one else has gone through" (Introduction: 54). Elisapee agrees, saying that while she does not think it is right for a human to eat another, "we don't know what our future holds. If it were our only chance for survival, we just might end up doing that too…We can see life meant a lot to this person…If she had just given up on life, we wouldn't be around today [referring to the fact that the woman regained her health and went on to bear

more children]" (Introduction: 57). Traditionally, actions were not morally 'good' or 'bad' in themselves but were assessed according to cause, context and consequences.

The important *maligait* (guidelines for doing things properly), *piqujait* (things that have to be done) *tirigusuusit* (things that must be avoided, refraining rules – Aupilaarjuk compares them to modern ones in the 'Law' interviews: "*Qallunaat* [non-Inuit] also have *tirigusuusit* such as not working on Sundays" [24]), and *pittailiniit* (things that must not be done, taboos) seem to have been most crucial regarding issues of birth, illness, the provision of food, safety and shelter, the cooperation of the spirit world – that is, issues of survival. Regarding the rule that one must not grumble, complain, abuse or laugh about wildlife, for example, Nutaraaluk says, "If we are happy and gracious towards wildlife, they will be in great abundance. If we are not thankful and don't appreciate them, they will disappear" (Law: 39).

Survival and long life depended on following the rules and practices that promoted positive consequences for the individual and/or the group. For example, being kind to others ensured that they would be kind to you when you needed it: "I was told to take good care of my children and be nice to them because they would be the only ones to take care of me when the day came that I needed help," Naqi explains (Childrearing: 84). As Aupilaarjuk emphasizes, "Whether people break the *qallunaat* laws or the Inuit *maligait*, the consequences are the same. A person will shorten his or her life" (Law: 16).

The notions of what should *not* be done were similarly based on pragmatic foundations. One should not do things that threatened survival or created problems for the group (because creating problems for the group threatened everyone's survival). For example, hurting someone (or an animal) physically or emotionally could lead to a desire for revenge in the one who had been hurt, and the

consequences could befall not only the individual but the group. Being lazy put responsibility on others for one's welfare, in a situation where everyone was already under pressure in providing for themselves and their families. Gossiping or boasting created bad feelings and jealousies which could interfere with the necessary relationships and business of group life. "Gossip can separate family members and create enemies" Imaruittuq says (Law: 144). All elders emphasized. like Naqi, "We knew that eventually we would be paid back for our wrongdoing" (Childrearing: 102), sometimes into following generations.

Repeatedly, the elders' explanations of events and behaviour and rationales make it clear that reason/logical thought was valued as central to wisdom. The North Baffin word for 'camp leader' is in fact *isumataq*, from the word *isuma*, meaning thought/sense/intelligence/inspiration/imagination (Spalding & Kusugaq, 1998). Imaruittuq and Akisu, in a discussion of counselling with offenders, stress this importance of thought. Imaruittuq explains:

> Later he would realise that he did have something to contribute and when he did start thinking about this, he would want to go back to the community. That's part of being wise. All of us here have a mind. We are all able to think. The person they were trying to rehabilitate also had a mind (Law: 54).

Sharing of meat, especially in times of hardship, was a major ethical responsibility, for starvation was always a spectre in a hunting society. It was a pragmatic reciprocal obligation, a traditional form of social responsibility (like today's taxation system) intended to ensure that those who had been successful in the hunt one day contributed to the survival and welfare of those who had not. The latter would then contribute when they were the successful ones. It was also believed that the hunter who shared would be guaranteed good hunts subsequently, whereas one who didn't share would be less successful. "As long as we have air to

breathe," Imaruittuq says, "there will always be stingy people. Those who are helpful to other people tend to be more successful hunters. It is also noticeable that those who have a tendency to be stingy are less successful" (Law: 136)

Rules about sharing varied depending on what area one came from. In some areas, for example, certain people such as significant elders or the midwife who attended at one's birth were to be given certain pieces of meat in certain situations. Some elders say all meat had to be shared equally in times of hunger; others, that sharing in scarce times could be essentially symbolic in order to fulfil the ideal of sharing but still enable provision for one's own family. According to some elders, sharing in times of plenty was more flexibly viewed. Elisapee explains:

> There had to be a certain amount of stinginess as they had to keep some for themselves. They could give to those who didn't have much if they wanted to, but they didn't have to give to those who had a lot (Health:50).

'Sharing' did not mean that everything in the camp was communal property. The concept of individual ownership existed, and several of the elders stress that one could not help oneself to the goods of another without permission or acknowledgement. Nutaraaluk explains that, "*Nangminiq* means things are mine, nobody owns them but me. Guns, a canoe, an outboard are all things that are mine. Even a snowmobile, a *qamutiik* [dogsled], or harpoon are things that are mine" (Law: 141). Sharing and lending/borrowing were a way of life, but the concepts of theft and taking something without permission were recognized and such behaviour was unacceptable. Imaruittuq defines the terms: "If I went to a house and ate food without permission that would be *ivajarniq* [taking without permission]. If I actually took an object to keep for myself, that would be *tiglingniq* [stealing]" (Law: 138). The thief could be the subject of disciplinary measures such as gossip and mild ostracism, or more stringent counselling by the

elders. And Uqsuralik notes that it is quite permissible to request the return of something that you recognize as having been stolen from you (Childrearing: 56).

Respect for elders was ingrained from childhood in all the elders. In the traditional relatively isolated small group, elders were usually extended family members. Thus when these elders speak of *their* significant elders, they refer primarily to parents and relatives – fathers, mothers, aunts and uncles, grandparents, in-laws. Elders had survived, and therefore had important wisdom and knowledge to pass on, both orally in stories and legends and as models for skills and behaviours. Elders thus had much authority, especially with their own children and children's spouses, and their opinions carried much weight, but their power was informal, founded on the natural respect they were afforded by younger camp members. Those seen as camp leaders because of their competence could make decisions that they felt were crucial for camp survival, although they may indeed have been younger. But as noted above, elders disagreed with the leader when necessary, and Nutaraaluk remembers that "If an elder felt you needed to be talked to, you would be filled with trepidation. We had great respect and fear of elders" (Law: 120). Elders minds were said to be very powerful, and if elders were mistreated or offended, they might will negative consequences on the one who had disrespected them. "It was very dangerous [to hurt an elder's feelings]…Something could happen to you even after the elder died, if you had been disrespectful," Aalasi and Akisu stress (Health: 244).

It seems, too, that the authority of an individual's *parents* may have been stronger than the authority of other less intimately-related camp elders. Imaruittuq, for example, speaks of following his mother's advice, but feeling independent when she died, free to do whatever he wanted with no one telling him what to do, though he came to realize that he should carry his mother's advice within him:

> When my mother passed away, I was wrong to think that there was no longer anyone to give me advice. I was free to carry on my life as I wanted because there was not anyone giving me advice. It turns out this was not the case for I was supposed to hang on to the advice she had given me and not let it go (Law: 84).

His mother, rather than other elders in the camp, seems to have been the defining elder in his life. Others too refer to the fact that while the advice of the elders should be respected and followed, it was possible – in fact, permissible – to make decisions on one's own when one became an adult. As well, individuals and individual families were not tied to the group. Pauloosie, for example, who says he never experienced hunger growing up, tells of really only understanding that food can run out "when I started being on my own, away from my adoptive family" (Introduction: 101). Men, as heads of families, often made their own decisions about, for example, going hunting or setting up in a new location, especially when parents were no longer alive. "My mother had said to us that after she died we could go anywhere we wanted to. She would say this to my husband. My husband listened to her words after she had died peacefully," Naqi recalls (Childrearing: 25).

All group members were expected to follow the rules that affected group survival, but decisions about other life matters were very much individually based. Non-interference in individual and family matters was generally a norm. "We were told not to interfere in the lives of others. We were told not to have that kind of life," Victor says (Transition to Christianity: 92), and though as a shaman he would have had special powers to "sneak a look into the life of another person," he was told by his mentor elder not to even think about his neighbours. Decisions *could* be strongly affected by the wishes of parents, and advice was sought from and given by elders and others, but individuals essentially decided whether or not to comply with the advice. There were generally no social sanctions if they did not – it was

seen as their choice, however foolish, and they then were simply expected to accept the consequences of their decision. Tipuula relates that although in her family's area there were strict rules and taboos about contacts with sick people, her grandmother refused to follow the taboo and instead devised a way of counteracting the negative effects of the rule-breaking:

> There were some people that nobody wanted to help because…there was a *pittailiniq* [taboo, refraining rule] attached to them, so others were afraid to deal with them. My grandmother did not let fear stop her from assisting those who need help…She would remove the bottom of her sleeves prior to helping them, which allowed her to be untouched by the consequences. It was said that anyone who helped those who were *tiringnaqtuq* [under a refraining rule] would not have very long to live…She would say "If I am to have a short life, then so be it." She would go ahead and help these people anyway (Health: 121-122).

This respect for individual choices and personal responsibility is reiterated throughout the interviews. Such independence and individual responsibility and initiative were valued, despite the respect for the opinions of elders, because that too was a survival skill. It was necessary that each person be responsible, be able to make decisions, take action, be competent. As such, they could best ensure survival for themselves and their families – and help the group when necessary. Cooperation was necessary in any group situation, but it seems it was also necessary for everyone's benefit that people not be too dependent on others. As Tipuula emphasizes:

> We were taught how to think when we were growing up. We weren't taught other people's ideas; we learned how to make decisions of our own. If we felt something was right, we accepted it, and if we felt it was wrong, we didn't. We had to learn to think for ourselves (Health:86).

Competence was highly valued, for survival depended on well-developed skills. Physical strength, ability to think, ability to control one's emotions and behaviour, ability to solve problems, ability to withstand pain, accomplishment in such skills as hunting or sewing, and so on, were prized qualities. The word "capable" comes up repeatedly in the elders' conversations, as a wish and a requirement. Tulimaaq, among others, talks of midwives and elders "bestowing" qualities on newborns:

> Our grandparents and our parents wanted us to have good qualities and abilities that they liked, and they wanted us to have these qualities such as being capable. Maybe through voicing these qualities they shaped the future for the newborn. They wanted the child to be good at something (Law: 68).

Sometimes these would be qualities that the parent would have liked in him- or herself . For example, Aupilaarjuk says of his father:

> When I was a newborn, my father shaped my life by saying that as long as he were alive, others were forbidden to wear my clothing. He did this because he didn't want me to be shy, he wanted me to be able to express my thoughts and be able to look others in the eye. As he was an orphan, he didn't have these abilities himself (Law: 29).

Camp leadership was based on merit, such recognition being granted to those who were good hunters and decision-makers. "We would go wherever the *isumataq* [leader] wanted us to go. He would think, 'Maybe there is a better area for hunting seals'…[he] was the one who was most skilful, who knew where there would be seals," Victor recalls (Transition to Christianity: 72).

Competition was valued as a way of building capabilities and of assessing achievement and competence. Men, women, girls and boys constantly tried to outdo each other in contests, games or friendly rivalries. Naqi and Uqsuralik tell of

a game where one tried to control one's laughter the longest. Rachel tells of learning to write, and how "we tried to be better than our fellow-children," practicing in fresh snow (Transition to Christianity: 133). Virtually anything could become a competition, and these elders seemed to have revelled in such activities. (Competitive games are still the major source of fun at all community gatherings.)

Standards were high and children learning skills tried repeatedly, on their own initiative, until they got it right. Saullu tells of learning, "I would only cry when what I was sewing wasn't done right" (Introduction: 64). Aupilaarjuk explains about igloo building that "It's the same as building a house. You have to follow certain standards or codes, *maligait*, in order to build it properly" (Law: 15). A *kamik* (sealskin boot) that was not sewn to be watertight or a poorly-built igloo could mean death.

Taking responsibility for doing what was necessary when it was necessary was valued; self-indulgence and laziness were frowned upon. Aupilaarjuk says, "*Qallunaat* [non-Inuit] are not happy if things are not done on time according to their schedules. Inuit were like that too. If they didn't get things done on time, they weren't happy about it either" (Law: 14). All discuss examples of things that must be done, and must be done at the necessary time, regardless of whether one feels like doing it or not. Caribou would not wait, weather would not stay ideal indefinitely, lamps would not stay lit, clothing would not mend itself.

Modesty about one's accomplishments was also valued, for boasting could lead to envy in others and possibly actions injurious to the welfare of the group, including murder of the envied person. For example, Victor explains that the shamans who used their power to kill might harm "anyone who was very skillful, a good hunter, a fast runner, a good seamstress, or had skills to make good tools, then the *angakkuq* would be jealous and would try to kill them" by hexing (Transition to Christianity: 105-106). And Imaruittuq explains a more common

danger of jealousy, that a hunter boasting of his hunting prowess could thus endanger his own and his group's survival if the time came when help was needed:

> Yes it could be dangerous…Perhaps this winter they might have a lot, but the next winter they might go through hard times. That's why we were told never to brag about how successful we were or how much food we had. We were told never to challenge or put down other hunters…If I had a lot of meat one year, I would distribute and share it, for maybe the next year I would need assistance because I wouldn't be catching anything (Law: 40).

In explaining this, the elders again demonstrate their practical understanding of the nature of humans and methods necessary for maintaining group harmony.

Adaptability and creative innovation were valued. For example, such new material goods as saws and boats in the older days, snowmobiles and guns in more recent days, were quickly adopted and adapted. Imaruittuq recalls that, "When [our ancestors] got boats with sails, they felt really capable…Our ancestors were lacking in material things, but in my father's time they had boats and no longer need the *qajaq* as it could not carry a large load" (Law: 80). Again, such adaptations were driven by a pragmatic awareness: if new technology and materials make life and survival easier, use them.

As discussed above, respect for animals and the land was also a crucial value, for physical survival depended on the availability of game. To hurt animals or to offend them meant they might take revenge by disappearing, or by turning on humans. Killing animals was to be done for survival only, not for fun or sport; and because the animal had given up its life for the benefit of a human, its death must be respected. Thus, for example, as much of the animal as possible was used for food, clothing, ropes, etc. – no useable part was to be left to rot, for that would be disrespectful of the animal's sacrifice.

Although honest communication regarding problems and feelings was valued, as we shall see below, stoicism in the face of inevitability or in annoying or upsetting circumstances was also important. The negative effects on self and others of despondence, resentment or complaint about things that could not be changed, or which were seen as unimportant, could disrupt the tasks, relationships and attitudes necessary for successful life. Such feelings were generally to be coped with by changing one's thoughts and attitude, rather than by overt expression. From childhood, one was actively discouraged from complaining, as Naqi explains:

> Even though our friends did [something hurtful], we did not talk about this at home. We just went through it with our friends. The only time you spoke about it was if your parents asked, "What happened to you? What did they do to you?" And we would just respond, "It's not worth talking about," because we had been taught not to talk about such things (Childrearing: 69).

Tipuula explains why parents should not respond when a child is crying merely out of jealousy, or for attention: "He'll be crying for a while and then he'll eventually get used to it. The grieving he goes through is passing. He'll be able to cope with unhappy situations" (Health: 88). Many elders mention experiences in their adult lives when this phlegmatic coping enabled them to maintain equilibrium.

But joy and happiness were highly valued by these elders, and all describe many events that were joyful. The ability to find happiness and pleasure even in small events and accomplishments and acquisitions was an attitude that was encouraged.

These elders understand that there is a difference between ideals and practice. Values and standards of behaviour are guidelines for how life *should* be lived – but humans inevitably are imperfect beings. All the elders comment at

various times that, as Rachel and Victor say, "It was not always possible to be good. That is just human" (Transition to Christianity: 126) and "It is very easy to do wrong" (*ibid.*: 72). The very presence of rules and sanctions in a social group indicates an acknowledgement that humans do not necessarily behave according to the expectations and ideals, that there are differences and deviations which must be dealt with. As Imaruittuq explains about the rule about not having sex with animals because it would shorten one's life, "It has always been done. That's why we were told not to do it" (Law, 152); and, "Before the court system came into our lives and before the RCMP, we always had rules in our camps. Misbehaviour has always been a part of life."

The next section investigates the elders' beliefs about the nature of humans and their behaviour. What can be expected of humans? Why do they behave as they do?

Ideas of Human Nature and Behaviour

The elders discuss the experience of being human. They speak of the types, development and effects of personality; the causes and effects of thoughts and emotions; individuality and differences; ideal behaviour versus actual; the individual and the group; the problems humans encounter and create within and between themselves. Three dominant themes about humanity emerge in the interviews: that human beings are essentially similar; that each person is nevertheless unique; and that humans are thinking beings whose ability to reason is their most important tool for long life.

The elders all make clear their belief that humans seem to have an innate and individual core of personality, a unique self, that influences action and thought. They repeatedly make comments about themselves or others as being born with a certain nature, and that people are all different, act and react differently,

have different needs, etc. "Of course we are all different," Uqsuralik says when discussing suggestions for dealing with children's behaviour (Childrearing: 53). Elisapee explains that the advice she received from her mother and mother-in-law was conflicting because they had different personalities and interests:

> My mother and my mother-in-law were very different from each other. My mother would advise against taking a child outside too often because then he would want to be outside all the time; therefore, I would have to be outside all the time. My mother felt like this because she was always busy making something inside. My mother-in-law was not the type who made things all the time so she tended to spend more time outside with her children…When I was making something, my mother-in-law would tell me I would have time to do it later and to tend to the children for now. My mother would advise against taking the children out. I preferred my mother-in-law's advice…I did not agree with my mother's advice. There are different ways people do things (Health: 107).

Heredity as an influence in the formation of self seems to be taken for granted by all, and Naqi comments specifically about a learning problem her grandchildren have which is similar to one the father and grandfather had: "Maybe they take after their grandfather and their father" (Childraising: 52). Yet we are each nevertheless unique. "Children all have different personalities, even if they had the same mother and the same father," Tipuula states (Health, Ch. 2). Elisapee reflects:

> We are all taking different journeys, and I am the type of person who just doesn't lie back and be lazy during life. I don't know why I walked that path…My older sister who was next to me wasn't like that…I was completely different from her (Introduction: 19).

They indicate, however, that self also arises from interaction. One understands as well as develops one's own individual nature through the responses

and actions of others. Several elders describe variations of how midwives could "shape the child...such as wanting the child to be very capable and talented, or determining the strengths the person would have," as Aupilaarjuk explains (Cosmology: 12). They describe how personality development is affected by the responses and actions of parents or relatives or peers, and through the influence (direct or via others' perceptions and responses) of the person whose name the child carries. Uqsuralik explains about naming that:

> If you knew the person the child was named after, you had to treat the child exactly like the person they were named after. If the person that the child was named after was a very nice person, a very kind person, you would have to make sure the child was being raised to be just like the person they were named after. Sometimes children show exactly the same behaviour and attitudes as the person they are named after (Childrearing: 45).

They speak of self-concept and self-esteem developing as a result of how one is treated by others. Uqsuralik stresses that:

> We should never, never tell our children that they are really bad. If we keep saying that, if they keep hearing that they are terrible, or how bad they are, they will begin to believe it. If they hear that they are good, their self-esteem will be raised. If we see our children not doing well at school, we shouldn't say, "You are doing terribly..." What we should be looking for is any improvement. We should tell them, "Please keep on learning. If you persist your grades will get better." If they hear that then they will start believing that they are good and can do it (Childrearing: 60).

(It is interesting to note, however, that Elisapee [Introduction: 19] says she was never praised, that she was often treated negatively and criticized, but that did not hurt her feelings, only made her more determined to do better. We are all different.)

Each person thus becomes a unique individual whose selfness is composed of innate characteristics, aspects of the one whose name she carries, and the effects of environment, influenced by each factor but not determined by any one.

Humans need to be able to cope with unpredictability, change and hardships, to take control of events in their own lives, and to live harmoniously with others, the elders state repeatedly. Children were thus taught to be self-sufficient rather than dependent, to cope with difficulties and conflicts on their own rather than to depend on others to solve problems for them, to take responsibility for their own circumstances, actions and feelings rather than to blame others or external causes, and to be undomineering. Naqi explains that parents were never to defend their children:

> You shouldn't defend your child too much. If you do the child will become aggressive. Not only aggressive but bossy. They would think they could do anything…If the child comes home crying and you ask "Who did this to you?" it's not going to help the child…You cannot take their side or let them dominate the situation, otherwise children will never think they're in the wrong. When you know the child is able to understand, you talk to them. You say such things as, "Please play nicely with others so others will be nice to you" (Childrearing, 68-69).

Uqsuralik adds:

> …they can get an attitude…Their mentality changes and they take advantage of the situation…That is why we always make the children think about the commotion and not show them we are defending them. When you raise your child this way, the commotion gets resolved. They learn to resolve conflicts, and the whole situation settles down. But if you don't do this, then they become gossips…They start lying because they know they are going to be defended (Childrearing: 70).

All children, the elders agree, require both firm, consistent discipline and love in order to develop into the most capable prosocial adults. "The child that had been disciplined tended to be a better person. They have been working on their character since childhood," Rachel explains (Transition to Christianity: 36). They are seen as developing in stages both physically, emotionally and cognitively, gradually gaining task skills, understanding and the ability to reason, self-control and so on. Tipuula stresses that:

> Some children who grow quickly are said to be more advanced physically than mentally…A child can be ruined if the parents have unrealistic expectations…We shouldn't rush them into things. They are eventually going to learn anyway, when they are ready (Health: 84).

Naqi, in explaining how to deal with children's behaviour, says that one must wait until the child himself or herself comes to understand the situation. "In the same way that their bodies are growing, so are their minds" (Childrearing: 53). As they develop, their behaviour is shaped by both nature and nurture – their own inner qualities and the influences of environmental experience and interaction.

The statements of many elders also seem to indicate that humans tend to be naturally curious and wanting to learn. Naqi talks of learning to understand written instructions: "We always wanted to find out what the writing was about. We were curious and we wanted to learn" (Childrearing, unedited transcript). Paniaq, Elisapee and other elders describe themselves or their siblings as always asking questions, wanting to know things, even though the rule was that children should not ask questions.

The elders' accounts make it clear that they believe people have a need to understand things, and their descriptions of events make it clear that they do so empirically, through rational thought and experimentation and analysis of facts. Naqi describes experimenting with night-time shadows, an event that was

frightening to some because of fears of vengeful spirits: "For example, now it's a full moon, you would check it out. It was your own shadow. You would crouch down and it follows you and to your own shadow. I won't get scared but I have to figure out how it was" (Childrearing, unedited transcript). In dealing with a group member who denied a wrongdoing, Imaruittuq explains, "...he would have the opportunity to speak on his own behalf. If a person stated that he had been wrongly accused the elders would tell him he could go for the time being so they could speak to the person who had made the allegation. They would also try to find out if there was anyone who had pertinent information. Once that happened they would decide what was the truth" (Law: 53).

Humans are thinking beings, they emphasize, and, as we have seen, rational thought was considered a critical quality of human life. People were expected to think about actions and consequences, for through such reflection and understanding one could gain control, and predict probable future consequences. Naqi stresses that as parents raising children, "You must always make them think...we have to think about the future, what is coming and how it can affect what you are doing..." (Childrearing unedited manuscript).

All the elders tell stories that demonstrate their belief that in humans, thoughts, emotion, physical well-being and behaviour are inseparable. Uqsuralik says that children who are "raised with love and are not only shown this but also told this, will learn to love others" whereas one who feels unloved "will tend to become a wrongdoer" (Childrearing: 104). All the elders talk about the belief that not talking about one's problems, guilts and stresses would create greater emotional problems and physical illness, as is illustrated in Aupilaarjuk's story demonstrating the connections between thoughts, feelings, behaviour and well-being:

> If you were keeping a wrongdoing hidden, you would be anxious, you would become so anxious that you would get sick from keeping this inside you. You could try to keep it hidden, but the mind is very visible, even if it is only thoughts. Perhaps someone in your family would notice that there was something wrong (Law: 22).

Imaruittuq, among others, describes how thoughts are so powerful that they can influence how we develop:

> When a young child thinks to himself, "This is the way I'm going to be when I grow up," this will happen…I used to think I'm not going to be like my father [describes a specific quality]. This has become true…I had that thought as a child, and that thought has become true (Law: 115).

Humans by nature, the elders say, will not always act as they should. Some will abuse or neglect spouses and children. Some will deny responsibility, be lazy, become angry, be greedy, lie. They succumb to jealousy and envy, and may act on those feelings to injure or denigrate another. They try to hide or deny wrongdoings. The elders all tell stories of their own experiences of such human-ness. As Rachel says:

> People were people both before and after the time of religion…Although people knew they were supposed to refrain from doing something, some people still did it…We who are now following religion are the same way….People know what they are supposed to do, but end up not doing it…That is just human (Transition to Christianity: 125).

I will make special mention of gossip, for all the elders say there were very strong rules against it, yet all speak of gossip as inevitable,[8] an issue that will be seen to be important in issues of counselling. "This has always been the case. Gossip, gossip, gossip. It is always at work in our lives," exclaims Imaruittuq

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[8] Gossip was thus a potent form of social control, much as it was also deemed to be unacceptable

(Law: 144). And Uqsuralik comments on this human tendency to be interested in talk about others, especially negative talk: "We always hear about bad things first and we rarely hear good things," and we embellish what we hear so that "a simple rumour can grow enormously in a short period of time. The original story is never the same, by the time it goes around the whole camp. That is why we are always asked not to gossip and not to say bad things about other people" (Childrearing: 97). Perhaps the rules against gossip were so strong precisely because it is such a natural human activity, even when people knew the dangers and consequences.

For although humans do not consistently live up to the ideals they set for themselves, they nevertheless always set up those ideals, for only then is it possible to live in a group. All the elders speak of the necessity of such goals, as well as of the rules and sanctions that make it possible to achieve those goals, in order to ensure harmony and well-being for both the individual and the group. Rachel, in explaining that they were told not to complain about one's husband because this would create disharmony in the community, says, "Because we did not want to live like that, we listened to their words" (Transition to Christianity: 22). Therefore, the elders stress, humans need to be *taught* to be kind, to take responsibility, be accountable for their actions, and develop problem-solving skills. Tulimaaq, when asked if character traits such as goodness and helpfulness were bestowed at birth, clarifies: "These qualities were taught to children by their parents, even before the child began to talk. But at birth the types of qualities that were bestowed were skills such as the ability to sew" (Law: 68).

Several elders speak also of a human tendency to be initially frightened or nervous of that which is different or unknown, recalling such experiences of their own. Imaruittuq remembers first meeting white men: "We used to be scared of *qallunaat* because of lack of contact. I'm sure they were not trying to be scary. We

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behaviour.

were just not used to them. We were not used to seeing strangers. It turns out they would be our relatives and our neighbours, but because we were seeing them for the first time they were strangers… Anytime we have a new experience we are easily scared" (Law: 84, 87).

Humans are needful of love and acceptance. Even "the baby is born with feelings, so we have to welcome him…" Aalasi says (Health: 173). Several of the elders speak of the importance of loving one's children, regardless of their personalities and behaviours, and accepting that each person is different. Elisapee, in explaining about the importance of loving and accepting adopted children regardless of behaviours that may be annoying to the parent, says, "That is their own personality" (Introduction, p 26), and this view resonates throughout the interviews. Children who are loved and accepted have the best chance of becoming responsible, caring, competent adults. "It is possible for one child in a family to be mistreated and that child will tend to become a wrongdoer. That's because this child has not experienced love from the parents. A child that lives with love tends to grow up as a considerate person…Children should know they are loved," Uqsuralik emphasizes. "That's what every child wants to feel" (Childrearing: 104).

Many of the elders imply a belief that it is human nature to want to feel unique. Imaruittuq, Elisapee and Uqsuralik tell of others who have the same name as they, but, as Imaruittuq says, "even though they are named after the same person as me I want to be the only one to carry the name" (Law: 85). And it is human nature to take pride in accomplishments and achievements, one's own and those of loved ones, even though pride may not always be openly expressed. The elders talk of their pride, and their parents' pride in them, at such childhood accomplishments as catching the first seal or sewing a parka. All speak with pride but not boastfully of various personal competencies and accomplishments throughout their lives.

Saullu tells factually of her capability as a midwife, both in delivery itself and in bestowing helpful qualities to the newborn:

> They are better people because of this…That is the way it is because I don't have much fear That is the person that I am….I have even put my hand up to the middle of my arm…to make sure that the placenta was not stuck to the uterus…I am capable of doing this (Introduction: 72).

Children should, they say, be praised or otherwise encouraged to feel proud of themselves when they do well. "You have to praise any accomplishments the baby makes…That is what is going to lead him through life, what he hears about himself," Aalasi says, and Jaikku adds, "That is one of the ways of strengthening a child" (Health: 174). Out of accomplishment and acknowledgement of accomplishment, the elders agree, grows self-esteem and self-confidence.

The elders seem to view humans as essentially competitive. As we have seen above, competition was part of Inuit society, as a way of developing and assessing competence, and of having fun. They tell stories of shamans challenging shamans, of games and other instances of trying to outdo each other, of the admiration for those who are competent, of some people's jealousy of those more competent, of struggles for leadership in a camp. Uqsuralik tells even of competition regarding names:

> When we share the same name…we say things like "I have the name more than you do. You are younger and don't have the name as much." Because we want to show that we want to have the name more than the other person, we try to outdo the other (Childrearing: 45).

Competition, however, does not seem to be viewed as negative except when it is used as a way of putting others down or when it leads to disruptive rivalries. It was natural – sometimes having negative consequences but also a potent motivator for developing skills, knowledge and competence.

Some of the elders imply or specifically state a belief that people essentially *want* to be good. Commenting on their beliefs that even when people do bad things, they are unhappy about their own behaviour, do not really want to be that way, but for various reasons cannot behave differently, Elisapee states, "If a child has behaviour problems he is singled out. I am sure they want to behave like the other children…I don't think they really want to be that way" (Health: 87), and Aalasi explains that, "One of the reasons some mothers mistreat their children is because the victimization they went through themselves is constantly on their minds, even though they want to treat their children well" (Health: 248).

The elders see male and female as having different qualities. Aalasi and Jaikku note that men are less likely to talk about feelings, "tougher in every way" (Health: 218). Uqsuralik says "Little girls were much more pleasant, much more sociable with each other…"(Childrearing: 55). Men were to be the dominant ones:

> Little girls were not to be the boss…The boys were always to be the dominant ones. They were not to be overly dominant, but they were to be the leaders. Men are different from us. They have to go out and fend for themselves on the land. If we trained them that we were the boss then they wouldn't be able to make it on the land alone. Women are more easily angered and that was another reason they were asked not to exercise dominance…(Childrearing: 79).

But although this acceptance of men as dominant is throughout, several of the men also echo Akisu's statement that "Men are not the only ones with wisdom. Women's minds have always been stronger. It is still like that today" (Law: 45). Women were also shamans, took part in counselling those who misbehaved, and one elder mentions a woman camp co-leader. Several also indicate that even in the past, not all men were the same, nor all women. Personalities and behaviours varied. A man might be more passive, less dominant, a woman more active and assertive (Imaruittuq describes his father as browbeaten by his wife [Law: 115]):

some men learned to sew, some women went hunting; and so on. Such variation was accepted.

It is evident from the interviews that the elders are also saying that all humans experience or are capable of experiencing similar emotions: joy, fear, love, grief, jealousy, greed, anger, amusement, pride, embarrassment, insecurity, self-pity, etc. Each talks many times of various such emotions connected to their experiences.

Finally, all humans have problems, individually and in groups. The next section elucidates the elders' perceptions of the types and causes of problems.

Causes of Interpersonal and Intrapersonal Problems

Problems, the elders say, have many causes: the natural human tendencies for un-ideal behaviour discussed above; the influence of environmental factors such as parenting styles, alcohol, and changes in social rules and expectations; a person's thoughts about events; differences between individuals and groups; and not expressing important emotions and thoughts.

Interpersonal problems may be the result of various jealousies and disagreements, whether between men and women, men over women, families, or other camps. Tipuula, in talking of fidelity in marriage, says, "I know for a fact that cheating creates anger, young people arguing from it" (Health: 79). Many elders describe the dangers of jealousies and rivalries involving shamans, hunters, more-and less-favoured children, and so on. "In those days too, people used to quarrel with each other, especially when there was a strong disagreement between two families or if there was a struggle for leadership" Nutaraaluk says (Law: 121).

Marital problems also arise, they say, from unwillingness to accept one's role and the nature of one's partner – usually, the wife's unwillingness to accede to the husband or in-laws. Marriages were arranged by parents, and women were often forcibly carried off by the agreed-upon husband. (One man, Victor, also speaks of not wanting to marry, sneaking off to try to avoid the union, but being fetched back and "made to have a wife" [Transition to Christianity: 5].) Although all the women say they were wary or frightened of men and marriage, but had no choice, several elders, men and women, speak of learning to love and accept their spouses. The women tend to agree with Tulimaaq:

> We were very afraid of men when we were young women…I didn't love my husband right away, but now I never want to leave him (Law: 66).

The husband was generally seen as the one who must be obeyed. Beating one's wife if she did not do as was expected, while not condoned in the past, was not necessarily seen as a problem behaviour in the man, even by women. Several elders echo Rachel's statement that in the past, "When you listen to your husband and you do what he wants you to do, then he will love you and treat you properly. But if a woman wants to follow her own mind and not listen to her husband, then he will start beating her" (Transition to Christianity: 23). Tipuula explains that parents were advised "not to raise a girl to fight back, so she would not challenge her husband when she grew up. Women put themselves in a bad situation if they talked back to their husbands…they were already preparing them for the future" (Health:). Frequent or severe abuse was seen as unacceptable, and Imaruittuq explains that efforts were made to counsel such people.

There are other causes of domestic violence and abuse. Personal characteristics such as aggression or a need to dominate could be factors, as Imaruittuq says: "Some of the abusers would be aggressive types and people would

be afraid to talk to them" (Law: 154). Poor communication skills, such as not expressing one's feelings appropriately, poor parenting skills, and alcohol abuse, which reduces one's ability to think things through or control one's actions, were all possible causes. Many also explain that such behaviour can be learned. Children who experience violence and abuse, for example, may learn to behave that way themselves, or to expect such abuse. "Children learn this type of behaviour…[they] grow up thinking that this is the way you have to act," Uqsuralik says (Childrearing: 104). And Imaruittuq explains that "Women who came from abusive homes were more inclined to marry abusive husbands" (Law: 154).

Several also emphasize the emotional effects of verbal abuse. "Verbal abuse is the most hurtful type of abuse," Naqi says. "It has the worst effect on a person" (Childrearing: 96). "Words can shatter lives," Aalasi declares (Health: 243).

Although all agree, as Akisu says, that, "Children who have been hurt emotionally at a very young age carry this into their adult lives" (Law: 54), a number of elders stress, that witnessing and experiencing abuse or other dysfunctional behaviour does *not* mean that individuals will *always* act the same way themselves. The role of thought and reflection is important, they say, for the learning can then be positive – individuals recognize behaviour as undesirable and determine that they themselves will act differently. Humans can reason, and thus have control over their own behaviour. Naqi says that her husband was raised by an aggressive father, and "He was just a small child when he said, 'I am going to get a wife one day [but] I don't want to be like my father" (Childrearing: 76) Uqsuralik concurs: "Some children tell themselves they don't want to be like that and they follow through on this when they are adults" (*ibid.*: 104).

Parenting styles, all say, can influence the development of emotional and behavioural problems in later life. All the elders talk of the dangers of spoiling

children, or defending them when they were accused by others of some wrongdoing, Such parental actions, they say, would result in a person who might lie to get out of trouble, or who might always blame others for any misfortune or personal wrongdoing, or who would always expect others to do for them, or who, as Tipuula says, "if you give in to them, then they tend to try and get their own way all the time when they grow up" (Health: 106). Imaruittuq gives an example:

> There is a man who is an elder now, who as an adopted child used to blame other children for things he had done. His adopted parents loved him so much they believed him. Even today, he still blames his actions on others…this developed into a habit for him…They learn that if they lie people will believe them, and they take this habit into their adult lives (Law: 48).

(I cannot help affectionately noting, however, that a number of elders happily describe incidents of being lovingly spoiled or defended by their own parents, or doing so with their own children or grandchildren.)

Too much childhood discipline results in a person who 'tunes out,' stops heeding behaviour expectations; too-severe punishments result in fearful, suspicious or aggressive individuals; too 'smothering' a love can create a person who is unable to make independent decisions; too little love can lead to insecurity, jealousy, and lack of self-esteem. Inconsistent discipline leads to manipulation and problems accepting inevitable limits. Tipuula, in speaking of stopping breastfeeding, says, "…we have to keep our word…we have to say what we mean so they'll get used to it faster" (Health: 88). And different children respond in different ways. Love and discipline, they stress, must be balanced, neither too much nor too little of each, and with an understanding of the individual child.

Lack of self-esteem creates problems, and that lack is at least partially created by parents' interactions with their children. Naqi explains that children

"who know they are loved have a higher self-esteem. Those who are told that they are bad act bad and think badly about themselves and get worse." Uqsuralik expands on this:

> We should never, never say to our children that they are really bad…if you keep putting them down, then they will start believing it and it will just go deeper and deeper thinking bad about themselves. If we love our children and believe in them and show them we are positive, then they start believing that they can, that they can do anything…And that is how we are supposed to raise our own children to have a good solid mind (Childrearing:).

How one thinks about oneself or situations, the elders stress repeatedly, has critical effects on physical health, feelings and behaviours.

All the elders speak of a relationship between mind and physical health. Not admitting one's misdeeds, for example, creates guilt and anxiety which would lead to illness, and Victor says that as a shaman, the hardest illnesses to heal were those that were caused by the sick person's unwillingness to disclose wrong-doings (Transition to Christianity: 103). Negative emotions, worry and mental stress lead to both mental and physical illness. Aalasi, for example, explains her belief that "…many people get heart problems from stress caused by other people" (Health: 207).

The elders also explain that social problems and conflict can arise when the group is too large or disparate, be they all Inuit, or Inuit and *qallunaat*. Many discuss their own observations that behaviour and problems vary depending on the size and composition of a group: the larger the group and the more heterogeneous – even when involving only Inuit, let alone *qallunaat* – the greater the diversity of belief and action and thus the potential for conflict. Imaruittuq explains that:

> When a lot of people from different places get together, a lot

> of undesirable behaviour begins to occur…Even if we are from the same place, undesirable things start happening if there are too many people…they start doing things that are destructive. It's like when too many dogs get together. They create trouble. It is the same with people (Law: 26).

All the elders stress the need for strong family relationships and clear structured rules and expectations of behaviour. Problems arise when humans feel rootless and without directives. Aupilaarjuk talks of the arrival of Christianity:

> The Catholic priest said that our Inuit ways were evil. If he had told us that we had to follow the *maligait* [rules, guidelines] of Jesus, then I would have understood. We were only told to abandon our Inuit *maligait,* but they did not give us anything to replace them…I felt like I was in a void (Law: 23).

And Uqsuralik, in talking about young people in trouble with the law today, explains that, "I am not saying my life was much better than yours, but I certainly want to pass on the importance of having strong family relationships and respecting rules" (Childrearing: 28).

In their detailed discussions of shamanism, Aupilaarjuk and Nutaraaluk explain that hexing by a shaman was also a possible cause of such problems as depression, anxiety, difficulty in achieving one's goals (e.g., successful hunting), or illness.

Finally, all the elders seem to agree that the most important cause of distress and dysfunction is inability or reluctance to express one's feelings, worries or thoughts. We can convince ourselves of hopelessness, worthlessness, and the validity of distorted perceptions. Imaruittuq speaks of youth in trouble with the law, with no counselling, developing a mindset of "Forget it, I don`t care anymore. I might as well just make things worse" (Law: 51) and thus losing a sense of the possibility of change. Dwelling on problems makes them seem more

insurmountable. All the elders emphasize that keeping negative feelings and thoughts to oneself also intensifies problems or one's perception of problems. "Today people keep what's bothering them inside and it collects. It gets overwhelming ..." Aupilaarjuk says (Law: 25). All repeatedly emphasize the power of mind, the need to express feelings, thoughts, and worries in order to ease emotional pain and conflict. As Uqsuralik emphasizes:

> The mind is very powerful. If you don't talk to someone about your feelings, about your thoughts, they will grow and dominate you…You pout easily and get depressed and even when people are doing something nice, you see them as doing something bad (Childrearing:).

When problems did arise, what kind of help was effective? The next section describes the techniques of helping.

Properties and Strategies of the Helping Process

We have seen that the types and causes of problems, as explained by the elders, were multifarious. The aims of counselling, though not always overtly stated as such by the informants, are evident in the discussions, and include:

- understanding how one's actions are perceived by others
- understanding the consequences of one's behaviour, thoughts, and emotions
- changing unpleasant, unproductive or maladaptive emotions, thoughts and behaviours
- understanding the causes of negative emotions, emotional pain, relationship problems, etc.
- improving interpersonal relationships
- changing antisocial behaviours
- specific problem resolution

- increased self-esteem and self-confidence
- improving family interactions
- acceptance of personal responsibility for change

The elders use the term 'counselling' in two ways. The first is as a way of persuading someone to change serious socially-unacceptable behaviour. This is perhaps best equated to modern counselling with involuntary clients in the court system, or with others unwilling to accept responsibility for their own unacceptable behaviour. The other sense of counselling refers to strategies for helping an individual change a situation, behaviour or emotion that is personally problematic.

Some individual uncondoned behaviour was subject only to sanctions such as gossip, for the value of non-interference in individual or private family matters was strong. The individual knew what should be done, and was supposed to accept the personal responsibility to behave accordingly. In a small group, little can be hidden, and unusual or aberrant behaviour easily became the subject of public comment. In certain cases such as the neglect or abuse of children, other community members often simply and quietly took on the responsibility if gentle suggestions for change had not worked.

However, behaviour that was seen as creating disharmony, threat, or disruption in the group was dealt with in a series of counselling stages. Several elders mention the process; Imaruittuq and Akisu describe it in detail:

> Imaruittuq: If there was any type of strife in the community, [the camp leader and/or elders] used to get together and talk to the person who was causing it. If they listened the first time, that would be the end of the matter but if they persisted, the second round of counselling would be more severe, and unlike the first time, they did not talk about the good in the person or how the person was loved by the community members. If they still persisted, then the counselling would be even more intimidating...If the person

who was doing the counselling did not want the whole community to find out then they would go to the wrong-doer so they wouldn't be ashamed. But if they felt there was a need for more elders, then you would be asked to come [to them]...If it was a minor thing, if it was just a man and wife quarreling, they would be counselled by one elder but if it was a more serious matter, the elders would get together as a group to deal with it...Only the elders were present...[they] did not want others present in case they might gossip. [Embarrassment and intimidation] did not happen at the beginning, for at the beginning they took great care not to cause pain to the individual.

Akisu: If offenders were not made to feel embarrassed, and they understood what we said to them, there would be more of a chance to improve their behaviour (Law: 44-46).

Imaruittuq: We had a system in place that did not damage a person emotionally. We would deal with a wrong-doer with sincerity and without hurting the person...Only if there were repeated offenses, were severity and intensity necessary during counselling. You have to look at someone's face. You have to show a person that they are loved and people care for them.

Akisu: ...every person deserves sincere caring treatment if they are a first time offender (Law: 51).

(Uqsuralik explains that this same three-stage process was also used in counselling difficult children, with each subsequent discussions necessarily stricter [Childrearing: 57].)

The person would be asked about his wishes and actions, given an opportunity to speak his view. He would be encouraged to admit and take responsibility for wrongdoing or unacceptable behaviour. The most important technique used was that of encouraging the individual to discuss and analyse the consequences of behaviour, both the negative consequences of his current behaviour and the potential positive consequences of acceptable behaviour. The

need for change was discussed, and methods of accomplishing such change. "You would counsel them by making them think about the future," Aupilaarjuk explains (Law: 58).

Should the person still refuse to change, he was left to do as he wished but he would have to face the consequences of his behaviour. The consequences could include banishment from the community, either literally or as social shunning. "They could do whatever they wanted," Akisu explains, " but they had to do it by themselves. This was to give them an opportunity to think about what they were doing" (Law: 54). (The consequence for a situation that was deemed extremely dangerous, such as a murderer who was believed to be possible of further murder. could be death – the camp would make a decision to kill the dangerous person. Thus, Nutaraaluk relates, "Miqqualaaq was killed by the camp members because they knew he was a threat to them" (Law: 160).

Honesty and straightforwardness are seen as requisites for effective counselling, including calm confrontation when necessary. Nutaraaluk explains the importance of direct and focused questions, when describing his own counselling strategy with angry, potentially violent camp members:

> More than once I went to the house of a person who was quite irate and tried to calm the person down with words. I would be very blunt and ask the person if he wanted to take a life. First, that would agitate the person but it would also make him withdraw and think about what he was doing, what he was going through. As soon as I started being very blunt and asked focused questions, the person started responding to me You knew right away that the person was going to calm down, as soon as he started answering your questions. It made him rational, made him calm down and think about what he was doing (Law: 158).

Several elders provide other examples of the use of gentle confrontation as a tool for encouraging a person to think about his own role in a problem. The

individual was asked to assess how her own behaviour might be contributing to a situation. From the elders' conversations, it is evident that this strategy began early in life. As Uqsuralik explains regarding children who complained of problems with others:

> "Did you start that?" Make them think. "Maybe it was you who started the fight and maybe you have started the whole commotion?" Deep inside we are deeply defending our own child but we always make them think about what is going on (Childrearing: unedited transcript).

Gathering sufficient information for understanding was also important. Aupilaarjuk, when asked about questionable unacceptable-behaviour complaints, states, "The whole community had the obligation to find out if and why you were doing this…If it were true…That's where counselling comes in" (Law, 58). In counselling sessions, it was important to understand all sides of the situation, and the context of the problem. Appropriate direction and decisions could not be made with insufficient information. As Akisu says, "Of course in each case we have to clearly understand the facts and circumstances involved in order to be effective" (Law: 54).

This importance of understanding the individual`s circumstances, and conveying that understanding, is mentioned or implied by several elders. Jaikku says, when speaking of people with whom it is comfortable to talk about problems, "There are people who are very welcoming. It is easy to listen to them when they speak as well. Some people think they are different from others but they are not. You think to yourself, 'They are like me. They have gone through what I have gone through'" (Health: 255).

Related to understanding is nonjudgment. Imaruittuq and Akisu, above, have stressed that in counselling with offenders, it is important not to make the individual feel ashamed, embarrassed, or that he is a bad person. If a person was

made to feel judged, humiliated, defensive, etc., he would be less likely to accept responsibility for change. This criterion is mentioned by a number of other elders as well. *People* were not to be judged as good or bad, although their *behaviour* might be viewed as admirable or unacceptable. As Tipuula explains, this was an attitude encouraged in life generally:

> I was advised if I was going to judge someone it should be on how well they could make things…I was advised never to judge a person or say that they were good or bad (Health: 98).

And Elisapee reminds us that positive learning can result from negative behaviour: "Even if we hear something bad about a person, we should not be too quick to judge them. We can only learn from our mistakes" (Health: 47).

All the elders stress the importance of confidentiality. Effective helping necessitated that people be able to trust that their issues were not spread about. Aupilaarjuk explains that in his experience, counselling with offenders generally included only family members (although the shaman might be present in some cases) because family members would keep information to themselves. "If things of a serious nature were said, we didn't want them spread around as gossip…The wrong-doer who confessed might end up in a worse situation if what he said became an item of gossip" (Law: 49). Imaruittuq also stresses that this helping session was not a community event except in cases of repeated unacceptable behaviour. Public embarrassment and pressure was an ultimate strategy used in cases of recalcitrant behaviour:

> The elders did not want others present in case they might gossip. Gossip has a tendency to grow and as it grows people often add things that are not true…I have heard of only one individual who was counselled in front of the whole camp. This was done in an attempt to embarrass the person (Law: 46).

The issue of trust and confidentiality was also an important consideration to those seeking help. In speaking of her mother, who was often sought out for advice because she maintained privacy, Jaikku says, "There are not too many people that you can seek advice from and the ones that were approached knew how to keep a confidence (Health: 255). Elisapee stresses that trust and comfort are such important factors that the age of the person one seeks out is irrelevant:

> The person should talk to anyone who will listen to them, even if the person is younger or older ...as long as the person is trustworthy and doesn't talk about what is said. Sometimes you tell someone something in a confidence and much later you hear back what you said…Women used to say some teenagers were really easy to talk to and were really kind and welcoming. If you don't feel comfortable talking with a fellow adult or an elder, a teenager can sometimes be a good person to talk to (Health: 99).

Elisapee here refers to a quality that is also emphasized by others – the best helper is one who is welcoming and with whom one feels comfortable. "If a person finds someone easy to talk to, they go back to see them because the person makes them feel better," Aalasi explains (Health: 254).

The elders make clear their belief that intra- and interpersonal problems are enmeshed. The individual, though unique, lives within a larger social context, and thus his/her emotions and behaviour affect and are affected by others. Helping must therefore be oriented towards enabling the individual to find ways to be satisfied both within herself as well as within the external world. Aupilaarjuk describes how his parents and relatives dealt with his own problem behaviour: "All my relatives would get together and start counselling me. They would point out that if I did the right thing I would be much happier and my relatives would be much happier" (Law: 62).

Intrafamily and interpersonal problems were to be dealt with by talking to each other. Whether the issue was between parents and children or between adult family members, "People would work at returning to harmony by talking to each other," as Rachel says, and Victor agrees. "If you don't say something to them, you will just not have expressed your thoughts…When we Inuit have someone we love, and we find their actions inappropriate we need to tell them this" (Transition to Christianity: 26).

Several of the women do mention that in the past, women who were mistreated or intimidated by husbands or in-laws were advised by elders not to talk about it to others, for complaining could lead to disharmony in the group, "…taking sides would cause discontent in the community." Today, however, elders agree that it is acceptable and necessary to talk to someone when mistreatment occurs.

All the elders emphasize that the best strategy for solving emotional problems such as depression, anger, guilt and anxiety was to talk to someone. Keeping feelings bottled up simply intensifies the emotions, they say, as we have seen above. Victor, for example, explains that he sometimes felt a strong need simply to talk about his experiences and feelings converting from shamanism: "I would feel the need to talk about what I had gone through. It would be very strong…When I found a person I could talk to…I would feel a lot lighter after talking" (Transition to Christianity: 78). If it was noted that an individual seemed worried or depressed, someone would approach the person and offer them the opportunity to talk and be listened to. All the elders stress that open expression was essential for resolution.

Jaikku and Aalasi, however, also stress that the process of solving problems and overcoming painful emotions and dysfunctional thoughts cannot always be accomplished immediately:

Aalasi: For healing to work you have to start talking about all the hurts and pain from your childhood. You have a wound in your mind and it is painful. You are not healed immediately after you start talking. The wound has to heal by talking and crying first…Even when a person goes into healing as an adult or as a teenager, ongoing discussions are needed.

> Jaikku: Once a person talks about something, they can let it go. Then they can deal with another issue. You can't deal with all your problems at once…We are told to take our time and not rush through this process (Health: 248).

Although emphasizing a 'talking cure', Aalasi also touches on another strategy that was used to help people deal with stress and distress:

> Talk about the worries rather than trying to ignore it. If we try and keep busy, our worries go away for a while but they always come back. It helps to keep busy but it is best to talk about it. Talk to someone you know or to a friend, it is the best way to deal with problems (Health, Ch. 4).

Individuals were sometimes advised to do things that would take their mind off problems: be busy, do something enjoyable, help others, or do something different. Victor and Rachel, expressing their thanks for being included in the interviews, explain:

> Victor: I was told that when you stay in one place, you start getting sick easily and…become tired. I am very thankful and happy and grateful that you asked me to come because I have become more relaxed for a while.

> Rachel: What he has said is true for me also…When you go to another place for a while, even…outside the community, you come back rejuvenated. You come back rested and happier (Transition to Christianity: 161).

Several elders talk of the benefits of putting a situation in perspective, learning to think in terms of 'this too shall pass' or 'I won't let this bother me'.

Tipuula, Tirisi, and Elisapee, discussing strategies for problems (Health: 99) note that:

> Elisapee: Life has always been a combination of good and bad, like a very nice day and a stormy day.
>
> Tipuula: We tend to experience good and bad things in life. Feelings of pain and loss do occur, but they pass.

Because of their strong belief that "Our mind is very powerful in its control over us" (Elisapee, Introduction: 23) all the elders stress the importance of changing emotions and thoughts. Repeatedly, positive thinking is emphasized, and they tell of being advised to let go of anger, depression and negative thoughts, to "look for the bright side" (Imaruittuq) or try to change their attitude. They would be encouraged to think about how their feelings are affecting them and their behaviour, the possible consequences to themselves or others if they continue thus and the beneficial effects of more positive thoughts and behaviour. Nutaraaluk summarizes his personal view: "If I have terrible thoughts or negative thoughts, then I won't have a long life at all" (Cosmology: 28). And Aalasi, discussing the importance of the brain, says, "The brain is very important because it controls everything…The fact that you can withstand heat or cold and the fact that you can change what is on your mind, makes me believe that the brain is the most important part of the body" (Health: 215).

Although several elders say they do not themselves believe in dreams – Victor says that even as a shaman, "I never believe my dreams at all…I don't believe anything I dream" (Transition to Christianity: 114) – others talk about their usefulness as both a coping mechanism and a helpful tool in assessing and sometimes predicting waking life. Aupilaarjuk recalls that adults took dreams seriously. Children were asked to tell their dreams to parents, who would then try to analyse their causes and omens. "Some dreams can be very accurate and can

warn you what's ahead in the future, perhaps something bad" (Law: 59). And Tipuula explains that memories of abuse sometimes surface in dreams, which is then a starting point for dealing with the abuse. "Some of them block the abuse and it comes back in the dreams…They haven't talked about it and have tried to forget about it" (Health: 131).

Christianity is important in these elders' lives, and several refer to God/prayer as an option in cases of illness or distress. Tipuula, stressing the importance of talking out problems before they become overwhelming, says, "If you cannot find a person to talk to, you can always turn to God for he is forever listening to us" (Health: 99). Rachel says that although people have different religious beliefs, prayer can nevertheless be useful in healing groups: "Using these healing sessions, people try to get together and heal themselves. This includes prayer" (Transition to Christianity: 157). Aalasi describes how she helps those depressed by illness or surgery to change their perspective: "It is better to have to deal with a missing limb than to be whole and end up in Hell. This is the kind of advice I would give to someone like this who was feeling depressed" (Health: 216).

A traditional technique for general problem diagnosis was also used to uncover causes of depression. The helper in this *qilaniq* ritual did not have to be a shaman but did need to have knowledge of the technique. The individual who was feeling unwell or depressed lay down; his head was held suspended with a rope or other means. The helper then asked 'yes' and 'no' questions: "Is it because of…?" "Whenever the head became heavy, the answer to the question was 'yes'. Whenever the head was light, the answer was 'no'" (Transition to Christianity (Victor): 57). Once the cause was known, the individual could then take necessary steps for resolution and relief.

It is evident that all the elders believe that change is possible, although help may be necessary. Akisu points out that, "Even when people get older, there is still the possibility of improvement" (Law: 55), and, in speaking of alcohol problems, emphasizes his belief that change is a conscious choice: "A person can quit anything if they choose to do so" (Law: 59). Imaruittuq emphasizes more than once, however, that awareness of one's own behaviour is a prerequisite to change. "As young people we are not really concerned about how we live until someone makes us aware of our behaviour. You are not aware of your own actions" (Law: 49). People must know what they are doing and the possible consequences of that behaviour, and at times this is not possible until someone else helps them become aware.

However, change happens only if the individual wants it and does what is necessary. Help is ineffective unless the person wants to change. Aupilaarjuk tells of his grandfather's failure with his son: "Even though my grandfather was a great counsellor, he gave up on his own son. Because his son did not want to change…he would have to face up to the consequences of his actions" (Law: 44). Change is the individual's choice and cannot be forced.

Summary: Essentials of Effective Helping

Effective traditional Inuit counselling seems to be comprised of the following essential elements, arising from a pragmatic, phenomenological, rational, empirical, future-oriented worldview:

Values:

- reason (explanation, reflection, assessment of consequences)
- adaptation (knowledge, behaviour)

- respect
    - consideration of others
    - tolerance/acceptance (individuality, personal choice, personal context)
- helping when needed
- personal responsibility
    - resolution of interpersonal problems
    - choices (beliefs, actions, thoughts)

Counselling Relationship:

- Helper qualities
    - respect (individuality, personal context, choices, privacy)
        - nonjudgmental; trustworthy (confidentiality)
    - understanding
        - warmth, friendliness, caring
        - situational understanding (perceptions of problem, causes)
            - acceptance (nonjudgmental of perceptions, personal context)
            - human needs and behaviour (desire to be accepted; inevitability of faults and mistakes; causes)
    - belief in the possibility of change
        - if individual wants to change
- Helpee factors
    - trust
        - belief in confidentiality
        - belief in helper's ability to help (will listen, has experiences)
        - sense of being understood
    - willingness to change

Strategies

- encouragement of open expression of thoughts and feelings
    - rationales for necessity

- listening well
    - to develop helper understanding
    - as encouragement

- gather sufficient information (questions)
- analysis (thoughts, feelings, behaviours, dreams, specific problems)
    - awareness and understanding
        - reasons
        - effects/consequences
        - one's own role in a problem
    - development of potential interventions

- provision of interventions and directives
    - suggestions
        - changing one's thoughts and feelings (self-talk;
          explanation and examples)
        - physical or other activity (staying busy, helping others, etc.)
        - direct honest communication with significant others involved in the problem
        - sometimes prayer
    - explanation of rationales
    - individual choice re follow-through

Confrontation (to be done with concern for the individual) was a variable, useful and necessary in some situations. Prayer and use of the *qilaniq* ritual were mentioned by some informants as helpful interventions and can thus also be seen as client-centred variables.

Traditionally, then, helping was based on a foundation of respect for human uniqueness, individual context and individual choice, and belief in personal

capacity and responsibility. Caring and trust were important relationship factors. Strategies considered most helpful were expression of thoughts and feelings and, especially, rational analysis of behaviour and consequences.

It is, however, necessary to obtain information from younger Inuit, as values, behaviours and beliefs are not static from generation to generation. As well, approximately 91% of the population are below the age of 50, with 66% below the age of 30 (Government of Nunavut, 1999), and it is thus the younger generations who will most avail themselves of counselling services.

Younger Inuit

The Findings

As I wished to have a clear understanding of each, I first analysed each informant's responses individually. I then compared the sets of information in order to determine common patterns and generalizations regarding helpful and unhelpful processes and strategies.

Informant A

Major issues of importance to A are that she and her situation be understood; that she be treated respectfully as an adult; and that advice or suggestions be offered, but that they be explained and the choice of following through on suggestions be left to her.

'Understanding' has several aspects. Having the opportunity to explain her problem situation – and attention to that explanation – is central. The counsellor should allow explanation of background, both personal factors and problem

antecedents, and current life situation. Such descriptions and explanations should be attended to and accepted. Although the counsellor's ethnicity is unimportant, understanding of her background as an Inuk is helpful, she believes – familiarity with the North would probably make it easier to understand her situation. Yet helpfulness does not depend on this, provided the counsellor makes the effort to listen to and to hear her: the counsellor in the South was most helpful partly because she 'heard' what A said.

Her perception of being understood also comes from a sense of shared experience. This includes the counsellor's willingness to self-disclose – to talk about her background, experience of similar personal situations, and so on – to share herself with A. The counsellor's age also plays a role in this: someone of a similar age, even of a different background, is likely, she says, to have had comparable life experiences.

She also wants to be understood and accepted as the person she is – her personality, her preferences, her beliefs – without judgment or labelling. This includes acceptance of her preference to keep feelings to herself. She has self-awareness, and wants that self, and its responses and reactions, to be accepted as valid.

The second crucial issue is that of being treated respectfully as a competent adult who is an integral, worthwhile participant in the helping process. Thus, she does not want to be told what to do; she does not want assumptions or judgments or inaccurate labels to be made about her life or her emotions; she does not want to be treated like a child facing an authority figure. She wants her statements, perceptions, and opinions to be given weight. She wants counsellor opinions and suggestions to be explained as part of a dialogue in which she has input.

The third major factor is choice. She says she reacts negatively to being told what to do, or to attempts to force her to comply with some externally-imposed view of 'how things must be done'. She wants advice and suggestions in a problem situation (if she asks for help), but it is important that she be able to decide if the advice makes sense to her and if she wants to follow through. A calm explanation of a suggestion and its possible helpfulness seemed to be an important factor in her willingness to think about and try strategies.

Such reflection and thought, enhanced by solitary time outdoors, is a personal problem-solving strategy used by A.

She stressed that the helpful southern counsellor was "just a very nice person, and you could relate to her." The establishment of this positive working relationship was based on the following counsellor characteristics and behaviours:

- willingness to listen, hear and accept
- willingness to self-disclose, so that A got to know a bit about her
- evidence of knowledge and training
- provision of ideas and suggestions, presented as possibly helpful but not demanded
- willingness and ability to explain what she was doing and why, one adult to another
- provision of practice and subsequent mutual discussion, when applicable
- a calm, relaxed manner

She was thus undisturbed even by a counsellor opinion that she herself disagreed with strongly. The northern counsellor most helpful was also one who empathized with A's situation.

Confidentiality was also important. Although she is aware that in a small community people often know what is going on with others, a counsellor should not contribute to public knowledge of her affairs. However, she states that those involved in the helping process should share background and current information with each other, so that all have an adequate understanding of the situation.

The elders have little to offer her in terms of being helpful, for she sees their life as having been so different that there is little common ground; they would not understand. And she sees benefits for herself, as a person, in not automatically revering the elders.

Counsellor behaviours that she found unhelpful or disturbing were:

- assumptions and labelling (about her lifestyle, her emotions)
- 'you must' or 'you should' directives
- counsellor responses that seemed to indicate a training style rather than an authentic interaction
- a counsellor style that centred primarily on what we counsellors learn as 'attending skills', that is, with little movement to action
- structure, responses and reactions that seemed more oriented to fitting agency procedures than to fitting her needs
- counsellor presentation as agency authority rather than as helper

As mentioned, she prefers not to talk about feelings, and would find a push for expression of feelings not only unhelpful but as having a definite negative impact on her.

Informant B

Talking things out is of central importance to B. She has found in her experience that expressing her feelings, her frustrations, her needs, her thoughts is

extremely helpful, regardless of whom she talks to. "I really realize that talking to *anybody* ['…elders or young people or *qallunaat* or friends…'] is good, as long as you don't hurt them or they don't hurt you." And the helper she is most comfortable with will "just make me express." She does point out that a helper should be patient, encouraging expression but willing to wait until she is ready.

Being listened to and understood – understood both as a person and regarding the issue – are important factors for her. Helper strategies that have enabled her to feel listened to and understood include:

- getting to know her as a person
- paying attention to whether or not she is ready to talk about an issue, and allowing her to talk when she is ready, rather than forcing an issue
- paying attention to non-verbal cues like tone of voice and facial expression
- responses – paraphrases, etc. – that demonstrate understanding or the effort to understand (e.g., she says that she knew one counsellor understood because "I would always ask him what I just said, and he responded to what I said"; and herself, "When I'm listening to somebody, I try to say what they're saying. I make sure they understand, or I understand")
- asking questions that increase understanding of the situation (e.g., her main helper asks things like, "What made you think that way?" "What were you doing?")
- self-disclosure about own experiences

The helper's personal life experiences and knowledge may also be a factor in their understanding of certain types of situations, she says. For example, in talking about issues concerning her mother, she would prefer to talk to Inuit elders, for they know about her mother's life. For issues involving her children, she would talk to a *qallunaaq* [non-Inuit], who would have more understanding of children in

today's world, while an elder would be more likely to look at "their own experience when they were kids ..."

"Self-talk" and a belief in the possibility of making positive change are major helpful strategies for her. Thinking things through, analysing her thoughts, events, or what she is told, seems to be a personal strategy she uses frequently. She may then decide, "This makes sense," or not. She personally pays attention to her thoughts, and when she realizes they are heading along negative paths, she tries to change them to more positive ones. The woman who is most helpful to her also encourages her to become aware of her own thoughts and their roots in certain situations. A helpful counsellor, B believes, must encourage such positive self-talk as well as belief in the possibility of a more positive future. As a helper, she thus encourages others to look for and be attentive to both positive memories and possible positive aspects of the future, and to have belief in their own ability to make those positive changes. The past is gone, and really goes away when it is talked about, and now one must think of today and the future, she says.

She finds it helpful to know how others have handled similar situations, to get ideas and suggestions. Explanation of the 'how' and 'why' of advice seems important to her, so that she can assess whether or not the advice 'makes sense'. She will often try advice that has been given, but she will then decide whether or not it is appropriate for her to continue. She has found that what works for one person does not necessarily work for herself.

The need for confidentiality is "very strong". She says that in the past people thought of confidentiality but did not really realize its importance, for they lived in small camps and talked to someone they trusted anyway. Today, however, people are noticing its importance.

A summary of strategies that have been helpful for B includes:

- talking about problems and feelings
- awareness of and changes to self-talk
- thinking about things in order to understand what makes sense
- going for a walk or other enjoyable activity that will take her mind off a problem
- helping others, for in getting involved with others she helps herself
- journal-writing
- encouragement that positive change is possible
- prayer and reading the Bible
- having a 'mediator', a third person, involved when she and her spouse had issues to work through

She also personally believes in her dreams, not as a source of solutions to problems but as possible portents of events, or as a communication from an elder (both traditional beliefs). She says, however, that she does not spend much time analysing her dreams, but does on occasion share them with a friend who has similar experience of dreams as omens. (She mentions that not everyone – her husband, for example – is interested in dreams.) She also believes that the traditional practice of being named after someone and seen as that person, as well as oneself, is beneficial: it can make one feel twice as cared-for.

A counsellor should know herself and help herself first, she says. This self-awareness also means that in her helper role, she tries to have self-awareness, knowledge of issues that she is either not comfortable dealing with at the moment, or of which she does not have sufficient knowledge, and to deal openly with such situations, referring to others if necessary. A counsellor should then be willing to make a firm commitment to helping, listening, and understanding.

Finally, she believes that change comes from the self, with a willingness to acknowledge a problem, assess one's thoughts and actions, try solutions, and ask

for help when it is necessary. The most frequent phrase in this interview is "makes sense", and for her, change starts with openness to and about oneself and suggestions, and a subsequent rational assessment of what is, what is needed, and what might be helpful.

But this change can take time – one must be willing to practice, evaluate, get feedback, try repeatedly, for we learn from mistakes. The counsellor must therefore provide enough time and opportunity for practice and reflection, as well as give feedback when necessary. Happiness is inside us, she believes, but to find it we must first believe it is possible, and then keep working at achieving and maintaining it.

Informant C

Counsellor qualities that C feels are essential are patience, warmth, honesty, acceptance of the client and her "story" and good role-modelling. Culture and ethnicity do not matter to her personally, as long as the helper has the patience to listen and the willingness to help.

The counsellor should explain her role clearly, how she works, and what the limitations and expectations are on the counsellor (e.g., having to report to the court in certain cases, agency regulations, etc.). Thus the clients know what to expect from the counsellor, and what will be expected of them.

Knowledge and training are also important, and the willingness to discuss that background, so that the client can feel confident that the counsellor knows what s/he is doing. Always, she emphasizes, the counsellor must understand that all counselling sessions are 'about the client' and that changes happen because the client does the work. Finally, the counsellor must be committed to the client.

She knows from her own experiences that people can be very nervous when they first approach a counsellor. They come to a counsellor as a 'last resort,' when all other avenues of help (personal efforts, friends or other community helpers, etc.) have not provided resolution, she says. Or they come to a new counsellor when others have not been helpful. A good counsellor therefore welcomes the client with warmth and understanding. A comfortable, welcoming office environment, offers of coffee, etc., and time to get to know each other a bit are important. An unrushed presence and periods of appropriate silence also enable clients to gather themselves, feel more comfortable. She also says it is helpful to encourage clients to talk about their feelings and expectations about coming for help. In some cases, she finds doing some breathing or relaxation exercises a helpful way to promote relaxation.

For her, it is most helpful to concentrate on the 'now' – "Where am I now?" – and the future – "Where do I want to go?" – rather than on the past. A good counsellor will help her assess her present actions, thoughts and behaviour, and make decisions about what change (if any) is wanted. Once she has thought about these and has committed to wanting change, the good counsellor will help her set goals and choose options for reaching those goals. She feels it is most helpful to develop self-awareness about one's physiological reactions, thoughts and behaviours, and their consequences. She emphasized that each of these aspects affects all other aspects, and that changes in one will produce changes in the other areas, including feelings.

In her own work, she enjoys using a wide variety of concrete metaphor-based activities and has found this strategy extremely useful both for herself and for her clients. Such activities "make sense", make it possible to understand issues and situations in real terms, and to see where changes are needed and possible.

Again, clients must have the choice of whether or not to undertake exercises and activities.

Confidentiality is essential, especially in a small town. She explains to her own clients about confidentiality in the first session. Maintaining confidentiality under the circumstances here also means that in some cases she will visit clients in their own homes. She also never greets or otherwise acknowledges a client first in public places; it is the client's choice whether or not to greet her.

She does not think it is helpful to focus too much on feelings in the process of change. Expression of feelings is inevitable and helpful at certain times, but she feels that it is easy to become "stuck" at the feelings stage, making it more difficult to move on to change.

Giving advice is not helpful, nor is any form of "You should/you should not…" She feels strongly that the good counsellor can only present options. Change comes from the client, and only the client can choose what they wish to do, what they wish to try. Clients may, in assessing their situation with the counsellor's help, develop their own options and strategies. The counsellor may also suggest options that the client has not thought of, and suggest activities and exercises that will help the client develop awareness of body, thoughts, behaviour and interactions, and thus make choices. Clients too should choose when they are ready to end counselling, but should be helped to evaluate their progress and given feedback. Again, she feels it is important to stress to clients that positive changes were the result of their own commitment and effort. The door should be left open for clients to return if they feel the need.

A counsellor should not present herself as a friend; a line should be drawn between the personal and the professional roles. Related to this, she is uncomfortable with hugs between counsellor and client, except in some special

circumstances. Inuit often would like to give gifts for help, but this too is uncomfortable for her, and she is glad that agency regulations allow her to refuse. Instead, she explains that she cannot, and recommends that clients give the gift to someone significant in their personal lives.

Neither should a counsellor share personal life information, for focus should be on the client's situation. Self-disclosure about professional experience and knowledge is appropriate.

She says she was not raised to automatically respect elders or to believe they are necessarily more knowledgeable, although they may know things about the past. She believes in education and equality. She also says she knows that a number have troubled or unacceptable personal lives themselves. She herself would thus not be comfortable going to an elder for help, although she respects anyone else's choice to do so.

Her training has been in Western counselling process and strategies. I asked her how these fit into her experience as an Inuk. She believes that all humans have basic needs regardless of their cultural background, and that these methods fit with any culture, as long as the client wants to change. She has found these strategies appropriate and effective for her personally and in her work with Inuit clients.

Informant D

D believes that an effective counsellor should be non-judgmental, very warm and relaxed, and have knowledge about issues. She states that the counsellor need not have experienced the same problems, but must have knowledge and awareness of different types of problems and the possible consequences and behaviours that may arise from those. Common ethnicity or culture is not necessary, although speaking a common language well enough that both sides are

understood is an important factor. Client preference regarding the counsellor's cultural background is the deciding factor, she says. For herself personally, it makes no difference.

The counsellor should be able to build a trusting relationship with the client. Trust comes partly from the non-judgmentality of the counsellor. D says that a counsellor should never make statements or give personal opinions about the wrongness/badness or the rightness/goodness of a client's life or behaviour. Were a counsellor to judge her, she says, she would not want to return to that person.

Attention to the office environment, efforts to be welcoming and encouragement for clients to 'be themselves' are important. Sincerity and 'being yourself' as a counsellor are also crucial qualities. Clients can, she says, tell if a counsellor is pretending, and in small Northern communities, they see and hear about you anyway, so they will know if you are not being genuine. She thus explains her role to clients so that expectations can be clear, and talks a bit about her style and method of counselling, so that the client can get to know her a little. In this sharing and getting to know each other, she also lets the client know that they are welcome to change counsellors should they wish to.

Confidentiality is crucial, and in this setting especially, she makes it clear that not only will she not break their confidentiality, but that they must respect the confidentiality of others they may see there.

D believes a counsellor should not give advice, should not tell a client they "should" do or not do something. There is no one right way to solve a problem, she says, and advice given may be wrong. The helpful counsellor should therefore work with the client in developing different possible options and ideas. The counsellor can present ideas, but the client needs to decide which to try. The

emphasis, she says, should be on helping the client to find his own solutions, on encouraging him to realize that he always has choices.

She also believes that no one method is right for all clients. She feels it is extremely important for her as a counsellor to have a variety of ideas and strategies, for client needs and personalities are different. If she does get `stuck' or feels she is not helping, she will, with client permission, ask co-workers and supervisors for ideas. (And she thinks it`s quite appropriate for a counsellor to tell a client if she is 'stuck' – to her, it would be an indication of honesty, genuineness and humanity were a counsellor to acknowledge not having all the answers.) It is, though, important for the counsellor to be comfortable with a strategy. Everyone has different styles, and she feels she can be most helpful when she herself is comfortable.

She feels appropriate limited self-disclosure can be helpful in allowing a client to realize that they are not alone in having a problem, that everyone encounters such situations. In her own experience of getting counselling, she says she wanted to feel the counsellor was human, not perfect. And a little information about how the counsellor dealt with problems was helpful. Because self-disclosure was helpful to her, she uses it in her own work as well, sometimes using herself as an example, when it seems beneficial for the client. But within limits and with discretion, she says, for too much takes the focus off the client.

She is very client oriented. Clients decide if they want to change, what they want to change, how they want to accomplish the change, and the counsellor's role is to work together with the client to help him make those decisions. She also believes it is important for focus to be on the positive, on what *is wanted* rather than what *is not* wanted, for only then can goals be set. She said she knows change is frightening, so she works with the client to help him acknowledge that fright and find strategies to work through it. Time and patience are therefore necessary. She

stresses that she learns from clients too, learns about new options and strategies by being involved as they figure out their own paths.

D feels that expression of feelings depends on the client: if the client wants and needs to talk of feelings, allow it; if the client does not, do not force. Feelings are part of our total being, along with behaviour, body and thoughts, and generally, she says, people naturally talk of their feelings eventually. But she thinks that people can get 'stuck' in negative feelings, wanting to hang on to them because they are a 'known'. So she encourages people gently and over time to move past the fear and forward. The here and now, and where one wants to go, is more important than the negative past.

Listening well and understanding are important. If she and her situation are not understood, it is possible that counselling can even be harmful, for she would not get what she needs, not go in the direction she needs to go. In her own work, therefore, she constantly checks, through use of paraphrase, if her understanding is correct or not. 'Being there' for the client is crucial.

I also asked D how the Western counselling strategies and processes that she has learned fit with her Inuit background and Inuit clients. She says it is easily integrated, for what she has learned fits with the way Inuit lived. In fact, she says, she has been surprised to realize how many of the same techniques her mother uses when D approaches her for help. Her mother asks questions that emphasize personal choice and responsibility, focus on the here-and-now, goal-setting for the future, self-awareness, awareness of reality, and so on. "That's the way they've always been," D says.

Informant E

Ethnicity and cultural background do not matter to E personally, although he points out that others might feel a counsellor of their own background might better understand their issues; and language may matter, for a client of a different language may worry about not being truly understood.

What is absolutely crucial for building trust in the counsellor and belief in her ability to help, E says, is that the counsellor understand him as a person as well as his situation. The counsellor must not make any assumptions, but must take the time to find out who he is, how he came to this point and what he needs and wants. He would know the counsellor was building understanding by the kinds of replies given and questions asked. Most important in this process would be counsellor self-disclosure – a sharing of similar personal experience or of relevant stories that demonstrate empathy and insight into an issue. Through such sharing of experience, E would know whether or not the counsellor understood.

The counsellor should also explain his own ways of handling similar experiences. E states that this sharing of personal coping strategy is not the same as advice, but rather an example of an idea that might perhaps be helpful to him, and a demonstration that problems can be solved. Such explanation would encourage his belief in the possibility of change. The situations in which E finds it most difficult to ask for help are those where he may feel that there "is no way out," and the ability to generate hope is especially important at such times.

Advice or statements such as "Oh, you should…" or judgments about, for example, what will or will not work, would be completely unacceptable to E. His reaction would be to distance himself, to perceive the counsellor as not having understood his particular situation. Instead, the counsellor should find out what he has already tried to do, gather information about his preferences and situation, and

present suggestions only as possibilities for him to consider. He wants to be listened to, not told what to do, and the counsellor's first responsibility in the relationship is to learn about him. Once comfortable and feeling understood, he would gratefully appreciate suggestions.

Direction to "talk to God" would also not be helpful to E, for his preference is to talk to a person who has understanding of his experience.

E sees expression of emotions as beneficial, both as emotional relief and as a way of understanding one's own thoughts and feelings better. Feelings will "come out sooner or later," but being pushed to talk about emotions or issues before he is ready would make him withdraw. As well, he emphasizes that a counsellor statement such as "I know how you feel', especially early in the relationship, would create a negative response in him, for the counsellor is not "in my shoes" and he would question whether she really did understand. However, a counsellor explaining how *she* felt in a similar situation, or saying 'I know how you feel' in the context of demonstrating understanding through self-disclosure, would be helpful, for E himself could then assess whether or not the counsellor's understanding of his feeling is accurate and/or similar.

For E, confidentiality regarding both issues and emotions is crucial in building trust. As well, belief in the counsellor's competence is important, and hearsay reports of helpfulness could initially influence his choice of counsellor, although his impressions of personality, style and competence in early meetings would determine his willingness to continue. The counsellor should be 'real'; if she tries to put on a show of professionalism, it would give him the impression that the counsellor perceives herself as better than he. Nor should she 'act' more knowledgeable than she actually is. Such presentations of self would quickly lead him to terminate the counselling relationship. The counsellor's physical appearance can also affect first impressions of effectiveness: an uncared-for

appearance would suggest to him that perhaps the counsellor's helping skills are also uncared-for.

His usual preference is to seek one-to-one help, but he sees benefits in group settings, as a way of obtaining both ideas and support. a sense of not being alone.

Feedback by E (after he had vetted the transcript copy and my analysis) indicated that he believes people have different opinions about counsellor helpfulness, although he hopes his views may encourage readers to think about their own needs.

Comparative Summary: Younger Inuit

In the comparison of individual viewpoints, it became evident that there is striking concord among informants regarding both necessary counsellor qualities and behaviours, and unacceptable behaviour. Variations are evident primarily in opinions about specific strategies and helpful interventions.

The informants were unanimous in their opinions of what was essential for helpful counselling, as well as what behaviours were essential for counsellors to *avoid.* From the data provided by these informants, it is possible to formulate a generalization of effective counselling appropriate with these five younger Inuit. The analysis suggests that helpful counselling would always require:

Counsellor/Relationship

- genuineness, trust, sincerity, caring, acceptance
    - calm, relaxed, welcoming counsellor manner
    - confidentiality

- belief in the competence of the counsellor to help in the client's particular problem (knowledge, experiences, presentation)
- honesty (limitations, discomfort, personal experience)
- ability to generate belief in the possibility of change
- non-judgmental (client, client choices, problem, etc.)

Strategies

- understanding, and ability to demonstrate this understanding to the client's satisfaction
    - attending closely to the client (verbal and non-verbal)
    - gathering of sufficient information for understanding of the individual's situation, without assumptions or judgments
    - demonstration of understanding
    - appropriate self-disclosure (four perceived counsellor willingness to share personal experiences and information as helpful; one specified that such disclosure should only be professionally-based, not personal)
    - questions
    - paraphrasing
- time and opportunity for client to talk out issues and feelings at own pace
- reflection and analysis
- client input and choice regarding goals and desired changes
- provision of insights, activities and suggestions that may promote the desired change
    - variety of ideas
    - explanation of possible benefits
    - client involvement, choice and responsibility in selection and implementation of strategies and suggestions, allowing client to decide what 'makes sense' and is worth trying

Agreement was also unanimous that the most *unhelpful* and distancing counsellor behaviours were:

- not taking the time and effort to understand the client's situation from the client's point of view
- not being allowed to make their own choices about activities, goals and change strategies.

No one wanted to be told what to do; everyone wanted the chance to have input, assess what makes sense for them, and decide whether or not they wished to follow through.

Individualized, variable factors in the counselling process, which seem to be based on these informants' needs, viewpoints and preferences at specific points, include:

- the techniques used to demonstrate understanding (e.g., personal counsellor self-disclosure is important and helpful to some, not to all)
- the perceptions of what is helpful in order to feel adequately understood (e.g., similar experiences, insightful questions, or an accurate rephrasing of what the individual has said)
- exploration of the client's past
- the amount of and emphasis on emotional expression and emotions
- the perceptions of helpful and unhelpful suggestions and activities (e.g., prayer is stated as helpful by one person, but a suggestion of "talking to God" would be seen as absolutely unhelpful by another; discussion with elders may be helpful to some, of no relevance to others)
- counsellor ethnicity (not important to any of these informants, but might be to other clients, based on perceptions of being understood)

There were specific and in some cases emphatic variations in these individualized factors, clearly suggesting that these are areas in which attunement to the individual client would be especially necessary – in other words, that the counsellor must be client-centred in use of these strategies.

Given that the factors listed as 'always required' were unanimously cited by these informants, despite differences in background and personal values, it is plausible to suggest that they might apply to effective counselling with any younger Inuit. It also is reasonable to suggest that variations such as those mentioned above would emerge in any counselling situation, and client-centredness in these areas might thus be necessary with any younger Inuit client.

Comparison: Inuit and Western Helping

Comparison of the Inuit and Western perspectives is necessary in order to identify compatibilities and incompatibilities. It is evident that there are no significant incompatibilities in essential relationship elements and counsellor behaviours: developing and demonstrating trust and understanding; explanation; and client choice in goals, interventions and decisions). Although these aspects are evident in a reading of the descriptions, they are most visible in a summarized comparative table:

Table 4
Comparison of Elements of Effective Counselling

Modern beliefs and practices	*Contemporary Inuit views*	*Traditional beliefs and practices*
All people want to lead happy productive lives, according to their own needs and criteria.		All people want to feel good, happy, capable and accepted.
Each person is unique, and must not be judged. Each	The person must not be judged. Each person is different.	People should not be judged and should be treated with care.

Table 4 (continued)
Comparison of Elements of Effective Counselling

Modern beliefs and practices	*Contemporary Inuit views*	*Traditional beliefs and practices*
person's reality and context is different.		Each person is unique and each one's reality and context is different.
Change is possible if the individual wants it and works at it. Change comes from the person and cannot be forced.	Change is possible if the individual wants it and works at it. Change comes from the person and cannot be forced.	Change is possible if the individual wants it. Change comes from the person and cannot be forced.
Personal responsibility and choice.	Personal responsibility and choice.	Personal responsibility and choice.
Responsibility involves attention to both self and others.		Responsibility involves attention to both self and others.
Conscious awareness is necessary for change. Do not judge, assume, criticize, blame or label, but help the client become aware of behaviour and attitudes.	Counsellor does not judge, assume or criticize, but helps the individual understand themselves and their circumstances.	Awareness of behaviour and the consequences is necessary for change. Do not judge, criticize, blame, but help the person become aware of behaviour, attitudes, consequences.
Present and future are more important than the past; understanding of past can help shape present and future; client needs determine assessment of past.	Understanding of past helps. Present and future more important than past, but client needs determine emphasis.	Must always look to the future and think about how actions today will affect the future; past can not be changed but understanding one's past can be the start of healing.
Each lives in a social world, and that broader context must always be considered.	The client's circumstances must be understood.	The person's context must be understood.
Body, thoughts, emotions, actions are interrelated.	Body, thoughts, emotions, actions are interrelated.	Body, thoughts, emotions, actions are interrelated. Thoughts are especially powerful.
Relationship is crucial: trust, caring, genuine, accepting, and able to generate belief in the possibility of change.	Counsellor must be genuine, trustworthy, caring, accepting, and able to generate belief in the possibility of change.	The helper must be trustworthy. Counselling must be done with love, caring, concern and acceptance.

Table 4 (continued)
Comparison of Elements of Effective Counselling

Modern beliefs and practices	*Contemporary Inuit views*	*Traditional beliefs and practices*
Confidentiality is essential.	Confidentiality is essential.	Confidentiality is essential.
Do not excuse, sympathize with or condone dysfunctional behaviours. Careful confrontation may be necessary.		People should face up to the consequences of what they do. Careful confrontation may be necessary.
Be open to challenge, and nondefensive.	Be calm, relaxed, listen.	Stay calm when asking questions and giving explanations.
Have self-awareness, and understand that one's own worldviews and values are not necessarily the same as, nor appropriate to, the client.	Everyone is different.	Everyone is different: people do things differently, believe different things. One can only tell what one has learned personally, and others may think differently.
Listen actively and get as much information as possible (problem and context). Allow the client to define the issues and problems.	Get as much information as possible in order to understand the client/his situation. Let the client explain his problem.	Give people a chance to explain; ask questions; get all the facts. Listen to what the individual has to say.
Demonstrate understanding through empathy, paraphrase, appropriate questions, self-disclosure, reflection of feeling.	Demonstrate understanding through paraphrase, appropriate questions, appropriate self-disclosure.	Listen and understand the person's problem.
Work together with the client to develop goals and suitable interventions. Have knowledge of a variety of interventions from varied orientations, and explain the possible benefits. Do not pressure, but be directive to whatever degree is required by the needs of the client.	Work together to develop goals and suitable interventions. Be able to provide and explain useful ideas, but let the client determine what makes sense for him.	Give advice, but the person has to decide if s/he wants to follow it. Different things work for different people, but thought and expression of feelings are especially important. Explanation is important.

Chapter 6: Discussion

This study was driven by a personal desire to understand what culturally sensitive counselling with Inuit entails and by the sociopolitical mandate to provide helping strategies that are grounded in a culturally appropriate synthesis of traditional values and practices, and modern knowledge and skills (Government of Nunavut Bathurst Mandate, no date; Nutarak, 1999; Government of Nunavut Department of Health and Social Services, no date). The notion of cultural appropriateness, however, must be tempered by awareness that there is no cultural template applicable to all Inuit. James Arvaluk, former Minister of Education, in discussing the inclusion of Inuit traditional knowledge in the education system, states, "We have to remember that not all of the beliefs, customs or content pertain to all Inuit groups as there are some differences between them" (Government of Nunavut Legislative Assembly Hansard, May 27, 1999: 22-1[2]). Nor is Inuit culture static (Government of Nunavut Bathurst Mandate, no date).

Several research questions thus developed during the investigation. What are the essential values and strategies of modern counselling that lead to effectiveness in counselling? What are the worldviews, values and resultant strategies that were commonly seen as essential in effective traditional helping? What contribution might effective multicultural counselling add to this picture? What do younger Inuit consider essential to helpfulness? These findings could then be compared in order to generate a practical model of culturally-sensitive counselling that would illuminate and enable an appropriate synthesis of past and modern practice according to client need.

Consideration of the methodology and plausibility of the findings is necessary. The portraits that emerged also presented some surprises to me, which are discussed. Conclusions are drawn about the relationship between generic and

multicultural counselling, and about the study's ultimate purpose: Inuit-appropriate counselling. Finally, areas of possible further research are identified.

The Methodology

Adaptations occurred in my use of grounded theory methodology. For example, parts of my investigation of Western counselling, as well as my analysis of the elders' interviews, began with *a priori* categories which seemed appropriate to the nature of the research, rather than with categories generated from the data. My insights regarding counselling concepts and categories were also influenced by my prior knowledge of existing counselling theory. Initial attempts to understand explanations of axial coding in the literature on grounded theory were at times frustrating and confusing. However, the nature of my teaching, which involves intensive discussion with students, in plain English, of meanings and examples and uses of concepts, provided a foundation for comprehension. Once I thus understood the concepts of coding, categories, properties and dimensions, I did not require long deliberation in developing categories: in my teaching experience, I had already gone through the process. Glaser and Strauss (1967) comment:

> …no sociologist can possibly erase from his mind all the theory that he knows before he begins his research…Such existing sources of insights are to be cultivated, though not at the expense of insights generated by the qualitative research, which are still closer to the data. A combination of both is definitely desirable (253).

More voices became necessary during the course of inquiry: not only those of younger Inuit, which I had anticipated, but also primary theorists and multicultural advocates. I had been warned: Rennie, Phillips and Quartaro (1988) state that data collection in grounded theory "is influenced by the outcomes of the emerging analysis. The collection proceeds through successive stages which are

determined by the criteria for selecting data sources…according to what has been learned from previous data sources" (142). And as I had become quite passionate in my desire to understand in depth, I was happy to explore each path that presented itself. Since my purpose thus required conceptualization of conventional counselling, multicultural counselling, traditional counselling and the perceptions of younger Inuit – four generalizations – I developed separate portraits. Rennie, Phillips and Quartaro refer to Glaser's 1978 recommendation that this be done "lest the analysis becomes overly complex and burdensome" (145). However, comparison of each generated theory with others was then necessary in order to fulfil the research goal of identifying similarities and differences. That goal was best achieved by use of comparative tables.

In my initial analysis of younger Inuit, I analysed each informant separately, before beginning the comparison of voices. On later reflection, I realize I might well have begun the comparative inter-individual coding immediately, as with the elders, and saved some time and effort – but at the time, I thought the techniques of coding and internal comparison of statements seemed necessary for the understanding of each, an application referred to as the generation of "local theory" (Elden, 1997: 261; Lincoln and Guba, 1985: 205).

Two sections of the Western counselling investigation involved literature review in order to sketch historical maps of the development of contemporary and multicultural counselling.

Strauss and Corbin (1994) permitted me such leeway:

> As with any general methodology, grounded theory's actual use in practice has varied with the specifics of the area under study, the purpose and focus of the research, the contingencies faced during the project, and perhaps also the temperament and particular gifts or weaknesses of the researcher…Individual researchers invent different specific

procedures (276).

In my first inquiry, the shape of conventional counselling, the data from the contemporary speakers was not only saturated but flooding. In the thrill (and panic) of beginning research, I simply listened to every informant, even if they had nothing new to add. Had I paid more strict attention to guidelines regarding determination of saturation, I might have ended the inquiry after perhaps six or eight speakers. However, I believe the number of informants was finally beneficial: widespread consensus about the process model that emerged was clearly evident.

One of the younger interviews was conducted by e-mail. Although this was a workable method, the process occurred over a period of time, making immediate follow-through more difficult. It was more a 'questionnaire' process than a discussion, and I believe it is easier for most people to simply speak. It did not therefore produce the richness of content and flow that emerged from the face-to-face conversations

Regarding these interviews, it has been my experience that one often finishes a project, then wishes for an opportunity to do it again, polish, fine-tune, add the suddenly-significant piece of information that was missed. This interview experience was no exception. Were I to do this again, I would, for example, gather more information about specific helpful interventions, such as B provided. I would explore C's ideas of self-disclosure more fully. These are client-centred variables, however, which fit into the picture of helpful/unhelpful counselling which emerged, so my purpose, I believe, was nevertheless achieved.

Plausibility and Reliability

Janesick (1994: 216) says "Validity in qualitative research has to do with description and explanation, and whether or not a given explanation fits a given

description. In other words, is the explanation credible?" Qualitative research is flexible and interpretive, and as such does not easily fit the technical standards of quantitative validity measurement. Glaser and Strauss (1967) stress that the intent of grounded theory is not to generate verified hypotheses, but to generate plausible ones whose credibility can be assessed by the reader. I have endeavored to ensure credibility by a number of means.

Credibility is provided by the choice of methodology, grounded theory being appropriate to the research needs of immersion, in-depth comparison of multiple groups, and generation of concepts.

Triangulation – the utilization of multiple methods, data sources, and perspectives – is an essential element of any qualitative research in order to gain more thorough understanding of the phenomenon under investigation and thus enhance validity (Strauss and Corbin, 1990; Janesick, 1994; Denzin and Lincoln; 1994). The triangulation that is built in to grounded theory, with its demand for multiple groups and its acceptance of multiple methods of assessing plausibility (see below), is evident in this inquiry.

The traditional findings are especially vulnerable to questions of credibility and accuracy. Altheide and Johnson (1994) state that, "Cultural messages are made meaningful within situations of use. A valid interpretation of text without context is impossible" (496). Throughout the writing of my description, therefore, interpretations and generalizations are supported by direct quotes for which I have attempted to indicate context as much as possible, i.e., the general topic of discussion, for internal validity. Attention to the dangers of selectivity has been made: although the final portrait is one agreed upon by the elders, consensus is nevertheless indicated by such phrases as "all the elders", although only two or three may be quoted directly. Similarly, concepts suggested by some but not all informants are indicated, and included in the theory as 'negative cases'. The

concepts which emerged are thus visibly grounded in the data, the plausibility more easily assessed.

"The researcher needs to find a way to allow for the participants to review the material one way or another" (Janesick, 1994: 216). Back-translating my elders' analysis and distributing it to each, long returned to their communities across Nunavut, was not feasible. The findings were instead submitted to four of the Inuit involved in the actual interviews and their transcriptions; two responded. I also received feedback from six Inuit community members who have a deep commitment to the preservation of Inuit culture. Several of these readers are also involved in the formal implementation of Inuit cultural values and strategies in organizations, institutions and government. All have extensive knowledge of and involvement in traditional culture and the elders; one is the daughter of an informant, others are related to or familiar with the elders in other ways. One, since deceased, had considerable experience as a counsellor prior to her government policy position and provided me with extensive feedback about her experience of traditional and contemporary issues. All were thus in a position to evaluate my interpretations, with reference to the elders if necessary.

I am aware that people sometimes have difficulty expressing disagreement or criticism, and out of politeness may agree regardless of their private opinion of the 'truth'. This may be especially true when the researcher and respondent know each other, which was the case with all my readers. (The community is a small one.) Rather, I explained that as my purpose was not to prove a hypothesis, but to paint an accurate full picture, they could be most helpful if they indicated inaccuracies and misinterpretations, according to their knowledge and understanding of Inuit culture. "Is there anything here in which I am mistaken?" Such external falsification (Strauss and Corbin, 1990) of the findings might have necessitated further inquiry and comparison. The feedback was enthusiastically

unanimous: my interpretations were correct. Several readers offered personal examples reinforcing the accuracy of my findings.

Each of the younger Inuit was provided with a copy of his/her transcript and the analysis, again with a request for identification of misinterpretations and inaccuracies. No such inaccuracies were reported; each verified that the transcript and analysis accurately depicted what s/he had said and meant.

Plausibility of the traditional Inuit findings is further enhanced by the literature review, completed after the data analysis, which provided an element of interdisciplinary triangulation, recommended by Janesick (1994). The study's findings fit significantly with portrayals cited in that literature. The descriptions of values and worldview are congruent with those presented by the medical and anthropological researchers; and the components of helping discussed by Inuit healing facilitators and community helpers are consistent with the findings of this study. The principles of traditional counselling specified by Minor (1992) – reason, directives, acceptance of what cannot be changed, empathy and active listening – correspond to observations in this research, although I remain unclear about some statements re 'silence', and our ultimate conclusions are different regarding the difference and inappropriateness of Western counselling.

The chapters investigating and comparing multicultural and conventional counselling have been read by some practitioners and academics both in Canada and in England. No disagreement has yet been expressed, and two have requested permission to cite those findings.

Reliability in qualitative research is a more difficult goal than in quantitative research for "there is no single interpretive truth" (Denzin and Lincoln, 1994: 15). I have therefore endeavored to leave an adequate audit trail (Morse, 1994; Lincoln and Guba, 1985) in my description and discussion of

methodology, in order that "interested parties can reconstruct the process by which the investigators reached their conclusions" ((Morse, *ibid.*: 30). Huberman and Miles (1994) discuss required areas of attention: grounding of findings in data; logical inferences; appropriate category structure; justification of decisions and methodological shifts; researcher bias; and 'credibility' strategies.

In addition to the credibility strategies outlined above, my audit trail includes raw data in the form of transcripts (younger Inuit), relevant quotes to substantiate interpretations (Western voices and elders' information), and specific text sources (Western voices and elders' information). I have also provided: the rationales underlying research design and decisions/shifts made during the inquiry; detailed description of process and products of data reduction and analysis; and explanation of data reconstruction and synthesis. Attention to these areas was ongoing, with memoes made, for example, about theoretical sampling decisions, and possible gaps or biases.

Reflexivity

I have endeavoured to locate my self honestly in the inquiry, in order to help the reader evaluate both the possible influence of self and bias, and the efforts to set necessary boundaries around that influence.

Ethical Considerations

Punch (1994), in discussing the ethics of qualitative research, says that "most concern revolves around issues of harm, consent, deception, privacy, and confidentiality of data" (89). Close consideration was given to each concern.

Necessary research licenses were obtained from the Nunavut Research Institute prior to interviewing. This process included submission of summary of

purpose, proposed interview questions, informed-consent forms, all in Inuktitut as well as English, evidence of community interest in the research, and verification by the University of attention to ethical standards. Dr. Sammons, of the Inuit Language and Culture department at Nunavut Arctic College, had attended to these requirements regarding the elders' interviews; I did so for the interviews involving younger Inuit.

All elders had consented to be interviewed, and all understood that the results of their interviews would be published in various studies. They spoke publicly with no requirement of anonymity, are proud of their knowledge, wish it to be known, and are expecting the research to be published.

Younger informants were similarly aware of purpose and possible future use. Each read and signed a consent form (Appendix 1). Although each had the option of remaining anonymous, only one chose this. I have, however, chosen not to use any names or identifying information. Nor will transcripts be included in local copies of the thesis. This is a small community and informants may be easily identifiable from their words. Punch (1994) stresses that the researcher must be sensitive to possible harmful consequences regardless of efforts at anonymity, for informants may nevertheless be identified and "even people who have cooperated in research may feel hurt or embarrassed when the findings appear in print" (93). Informants spoke freely, and in reading the transcripts, I could predict some possible harmful consequences. I decided to forestall such possibility as best I could.

It is sometimes a source of disappointment and upset to Inuit informants that they do not often see the end result of their efforts and cooperation with researchers. A copy of relevant sections of this thesis (i.e., traditional helping practices; conclusions regarding counselling practice in the North) will therefore be provided to each community, through the Department of Health and Social

Services and the Nunavut Social Development Council, as well as to the Research Institute. Both younger informants and elders with the help of bilingual friends and relatives, can thus see the results of their contributions.

The Writing

The results of the inquiry are written in a dense narrative format that describes and explains the significant factors and data that coalesce into the grounded-theory models. "Discursive presentation captures the conceptual density and conveys descriptively also the substantive content of a study far better than does the natural science form of propositional presentation…" (Strauss and Corbin, 1994: 278). This was a pleasurable aspect of the research, for it fits my writing style.

In my delineation of methodology, I have endeavoured to describe my procedure step by step, with representative examples of process, thought, and memos relevant to each inquiry. Understanding and appropriate use of methodology is, I hope, thus sufficiently demonstrated.

The portrait of multicultural counselling focuses on its development and rationales, for the elements of effectiveness were not significantly different from those of conventional counselling, and a second 'dense narrative' of similar data seemed pointless. Those findings were thus summarized, but a more detailed description of the foundations of multicultural counselling beliefs seemed valuable for understanding.

Inclusion of all the elders' transcripts in the appendix was unfeasible, as they comprise hundreds of pages and several binders. Those transcripts are available in their raw form on computer disks, and in somewhat edited ethnographic texts that have been published since my analysis was completed.

References in direct elders' quotes have been amended to show their source in the published texts, for credibility regarding accuracy and for ease of location. These references also refer to the title (theme) of the published text in another effort to elucidate context.

I have provided full transcripts of four interviews with younger Inuit (see Appendix 3). (Length limitations precluded inclusion of all five.) In addition to being able to compare the analyses with each informant`s `real' words, the reader can also perhaps gain a better understanding of the person behind the words, for each is different.

The Findings

Effective generic counselling requires a holistic, integrative, client-centred approach based on warm understanding and acceptance of client individuality, needs and context, and client choice.

The findings regarding conventional counselling were not a complete surprise to me. In years of teaching, I had taught a process model based on Rogers, Carkhuff *et al.* (1977), Ivey (1976) and Egan (1982, 1986, 1994), all of whom had been the sources of my own training, and a 'package' of basic interventions chosen from affective, behavioural and cognitive theoretical orientations. This model was similar to the one that emerged. The concept of an accepted integrative process is not new: Corey (1996) and Feltham (1997), for example, make reference to such a model, although they note it is not yet a theory. What was a revelation to me, however, was the unanimity among so many speakers as to its essential components.

The depth of the seminal theorists' influence in and agreement with this model was unexpected. I had read and taught counselling theories, and used their

varying interventions in my own work, but I had never done an in-depth comparison of their concepts, nor had I compared their actual words with contemporary conceptions of needs in counselling. And I had taken for granted the veracity of statements about their limitations – for example, that traditional (Rogerian) client-centred counselling focuses and is based on 'self-centred' rather than social-context-centred definitions of self and self-actualization. What became evident through the comparison is that although the humanistic, phenomenological, and existential philosophies – on which affective theories especially are founded – indeed accent the importance and dignity of each human and the structuring of existence through personal choice, the theorists nevertheless *emphasize* the inseparability of the individual and her social world. Each person's reality is fused with and partially created by others, and choices must be made with awareness of and responsibility to that social context. The unanimity of the holistic view of the client, and emphasis on acceptance of client perceptions and decisions in all aspects of the process – problem-definition, goal-setting, choice of interventions, etc. – was unexpected.

Multicultural counselling seems to be a holistic, integrative, client-centred process identical to conventional counselling.

The findings about multicultural counselling were unanticipated, for I had again taken for granted the accuracy of the view that there were at least some significant differences. We have seen that conventional counselling has been criticized on various fronts. It is said to have an ideology of individual autonomy and self-fulfilment, and inattention to social context (Sue and Sue, 1990; Corey, Corey and Callanan, 1993); it is said to be based on "the assumption that a single standard is the norm by which all individuals should be judged" (Locke, 1992: 11) and that the standard is an ethnocentric, white, middle-class one; it is said to be 'talk therapy' – non-directive, and focused on expression of feelings (Laungani,

1997; Sue and Sue, 1990); and so on. We have also seen that the data provided by the seminal theorists and the contemporary writers does not support these perceptions.

While acknowledging that the strategies are rooted in existing theories, the literature nevertheless presents multicultural counselling as different and more effective, on the basis that in multicultural counselling the strategies arising from the theories "require careful monitoring and consideration regarding the experience and needs of each client" (Ivey, Ivey and Simek-Morgan, 1997: 201). Yet the necessity of careful monitoring and consideration is exactly what even Rogers advocated in 1951: the counsellor "must assume, in so far as is possible, the internal frame of reference of the client, to perceive the world as the client sees it, to perceive the client himself as he is seen by himself" (1998: 29); and we cannot evaluate "the person from our own, or some fairly general, frame of reference, but that the only way to understand his behaviour meaningfully is to understand it as he perceives it himself, just as the only way to understand another culture is to assume the framework of that culture" (494).

Multicultural counselling thus has nothing different to offer this investigation, regarding values, process or strategies. What it does offer is an emphasis on actively training counsellors to develop awareness and understanding of difference. From its beginnings, effective conventional counselling has stressed the huge importance of understanding and accepting client context, points of view, and meanings, regardless of one's own. Multicultural advocates take that emphasis a step further, with "increasing attention ...being paid to the type and quality of training available in this area" (Bimrose, 1996: 243). The effective counsellor benefits from education/training in difference. Krause (1998) explains she must be curious about the details of differences between clients as well as differences between herself and each client, and learn what to ask and how to ask it. But this

too is necessary for all counselling, she says, for "meaning is always problematic. This is equally the case in encounters between individual persons from more or less similar cultural and social backgrounds as it is in cross-cultural encounters" (Krause: 139).

Effective counselling in both a traditional Inuit framework and with younger Inuit seems also to be a client-centred approach based on trust, understanding and acceptance of client individuality, needs and context, with affective and cognitive interventions perceived as especially helpful, and decisions based on client choice.

I had been aware of the pragmatic, adaptive nature of traditional Inuit life, and the importance of reason; but the profound stress on a phenomenological empirical assessment of reality and truth, and the priority of reason, were new findings to me. And although I had long been told of the concept of non-interference in individual lives, I again did not expect the strong emphasis on individual context, action and choice that was evident in the traditional data. These findings were of special interest, since I have been influenced by the literature which often cites reason/cognitivism, innovation/future-orientation, and individualism/independent action as features *not* typical of non-Western or traditional cultures. Interdependence and cooperation were necessary qualities for survival, as they are in any group – Naiman (1997) points out that sharing and cooperation are cornerstones of all human societies; and the argument has been made that such values may indeed have an evolutionary basis, as they increase the chances of survival (Wilson, 1999) – but beyond the necessary, Inuit actively promoted individual choice, competence and action based on a personal rational assessment of circumstances and consequences.

Although control of feelings and acceptance of inevitability seem to have been traditional attitudes generally necessary in life – as they are, I think, for all of

us – it is clear that expression of feelings as a helping strategy was seen as a priority by the elders.

The emphases on reason – making sense, understanding, learning – and individual context and choice were also central elements in the descriptions by younger Inuit. Whether this is a result of having been raised within that traditional worldview or whether this is human nature – cognitive approaches have been shown to be highly effective generally (Zastrow, 1995) – is a question of interest.

The Model of Effective Counselling with Inuit Clients

Effective counselling with Inuit clients seems to require a client-centred, accepting approach in which affective and cognitive-behavioural interventions seem most useful.

It is evident that the relationship essentials of warmth, caring, non-judgmental acceptance, and trust in both confidentiality and belief in the counsellor's ability to help are common to elders and contemporary Inuit, as well as generic Western counselling. Value commonalities include belief in and acceptance of differences among individuals, attention to and respect for individual context, belief in client ability/need to take responsibility for change, and acceptance of client choice. All believe in the interrelatedness of affect, behaviour, thought and physiological reactions. Common process strategies include gathering sufficient information, listening well and with understanding, helping the individual reflect and gain insight, and providing options and ideas for client consideration and choice.

Inuit elements, both traditional and contemporary, involve affective, behavioural and cognitive approaches. Western counselling – which, through specific in-depth research and theoretical inquiry, has developed a wide range of

interventions – can contribute variations to enhance strategies already seen as useful and effective, or to provide new ones. It seems therefore reasonable to believe that if a new potentially-helpful process or intervention is clearly explained (a necessity in all groups investigated), it would be considered by even the most traditional Inuit if s/he perceives it to make sense.

Appropriate self-disclosure is a strategy for relationship-building and for demonstrating understanding. It is an element that seems especially important for most of the younger informants, for establishing a sense of being understood. Its use is not as explicitly discussed in the elders interviews, but is noted or implied in discussions of understanding and advice, wherein people speak of feeling most comfortable with someone who understands what they are going through. Counselling can thus be enhanced by training in the properties and dimensions of appropriateness in such disclosure.

Expression of feelings was seen as especially critical by the elders in resolution of personal and interpersonal problems. Positive self-esteem was also a factor in happy, productive life. Affective interventions involving exploration of feelings and strategies for developing self-esteem thus seem appropriate, and healing groups oriented to 'talk therapy' are in fact already ongoing and perceived as very helpful.

Traditional learning of behaviour depended on observation and practice, so behavioural strategies of role-modelling and practice of new skills are highly applicable. Calm, explicit communication was also seen as important: behavioural training in interpersonal communication skills thus seems appropriate and useful depending on client needs.

The centrality of thought/reason/analysis/consequences as a tool in problem-solving is most obvious in the elders' discussions, and understanding and

making sense are also critical expectations of younger informants. All the cognitive/cognitive-behavioural strategies thus seem especially compatible. It is understandable why Glasser's (2000) Reality Therapy/Choice Theory, with its emphases on rational analysis of goals/behaviour/ consequences, and on personal responsibility, strength/capacity and choice, has received such an enthusiastic response from Inuit counsellors, for whom it 'makes sense'. The approach seems to fit seamlessly into the traditional helping framework and worldview which have shaped Inuit life.

As noted, resourcefulness and innovation have been hallmarks of life in the past; Inuit have always looked for and adapted new ideas and strategies to solve problems and make life better. An eclectic approach to intervention thus seems to fit quite naturally into Inuit traditions: If one method does not work, it is important to seek other possible solutions.

There is, however, a significant difference between life then and now. In groups of fewer than ten to perhaps thirty people, one's group life was also one's personal life – family, friends, work, education. Then, as now, choices were made within the personal context, but then, there was no other. And inevitably, the helpers were one's parents, relatives, friends. Contemporary counselling draws boundaries between the personal and the working relationships, intended to make it more possible for the counsellor to keep the client's needs foremost. Given that most people probably come to a professional counsellor as a "last resort", as C says, when attempts to resolve problems through personal resources (friends, family, etc.) have failed, given the difficulties that sometimes arise in dealing with family and friends (expressed by community counsellors in personal conversations), and given the strong emphasis on unpressured personal decision-making among all the younger Inuit especially, it seems reasonable to conclude that this neutrality is a beneficial factor.

That considered, nothing in the process and strategies of traditional counselling seems inappropriate for counselling with younger Inuit – or with non-Inuit for that matter; and nothing in the generic Western counselling model seems inappropriate for either. But in each counselling situation, the counsellor must be alert to differences between herself and the client, must determine how these differences shape the client's perceptions, and must then adjust strategies to fit the client. We have seen that in the Inuit context adaptation, acquisition of new information and skills, and differences among people are acknowledged. Inuit culture is neither static nor homogeneous. The effective counsellor must therefore develop a clear understanding of the client's place *within* her culture. In other words, the counsellor must be client-centred. And the effective counsellor should strive to have knowledge of a variety of interventions to fit the client's needs.

Recommendations for Future Research

Although the models of effective counselling which emerged from each of the investigations are grounded in the data, they should be further verified through additional research (Strauss and Corbin, 1994).

The elders' interviews were a rich source of information, especially useful in understanding the worldview, values and beliefs about human behaviour out of which helping strategies arise. However, the opportunity to follow through with in-depth inquiry into meanings and specific elements of helping would have been invaluable. The unstructured/uninvolved-listener position has advantages, as noted, but an inquiry would benefit were interviews facilitated by someone knowledgeable about counselling concepts, not to lead responses but to recognize where further information would be beneficial to understanding.

The findings regarding the appropriateness of a generic integrative client-centred approach to Inuit may have implications for other non-Western groups. (Wright [1993] has discussed the importance of a Rogerian client-centred approach in work with First Nations peoples.) Sodowsky *et al.* (1994), Ridley *et al.* (1994), Ponterotto (1998), McLeod (1998), Merchant and Dupuy (1996) and others cite the need for increased empirical qualitative research with a greater variety of subjects in order to develop clarity and concrete guidelines. Research with clients from a variety of cultural groups (including more Inuit-client inquiries) focused on client perceptions and rationales of helpfulness, rather than on generalized models of culture, may be what is most needed.

In a time of multiple social and interpersonal problems, outcome research investigating the usefulness of different interventions in generating change seems crucial. How effective are healing circles, with their emphasis on expression of past and present feelings, and for what kinds of problems? In what areas has Reality Therapy been effective? Changing self-talk and thoughts was traditionally an important strategy. Might Rational Emotive Therapy strategies build effectively on that base? How might structured behavioural interventions help? Such research in the north is needed but complicated, for there are many willing helpers and some trained counsellors, but within their ranks, knowledge about and expertise in intervention options are limited.

Counsellors in the north are overwhelmed and overworked. Bimrose cites Steenbarger (1993:13): "...brief multicultural work does not need to be an oxymoron and, indeed, may represent a desirable and needed addition to counselling repertoires." Training in and subsequent outcome research about brief therapy models would determine whether this approach could provide effective help that also eases the burden on counsellors.

Further investigation of generalized models of culture also seems beneficial. We have seen that traditional Inuit worldview and values are not congruent with what is often said to be 'non-Western'. That may be true for other traditional/aboriginal/non-Western groups. Every culture also has both 'ideal' values and 'real' values, with variations occurring, especially in the latter, according to context and individual idiosyncrasy (Ember and Ember, 1999; Naiman, 1997; Spencer, 1990; *et al.*). Nussbaum (1997) says that conclusions regarding cultural value differences are often based on invalid comparisons – for example, non-Western generalized traditional ideals versus contemporary North American class-specific urban practices. Empirical research about actual behaviour and related rationales among a variety of intracultural groups may be enlightening.

The concept of multicultural counselling as distinct from and more effective than generic counselling seems to need scrutiny. If the findings of this inquiry are indeed accurate, then some ethical questions arise. Is division and controversy in the field acceptable, if the issue is in fact non-existent? Will clients be persuaded to forgo possibly helpful counselling if they have been influenced to believe that a generic counsellor will be inappropriate for their needs? Will referrals to possibly helpful counselling not be made if the referring source believes in the difference?

Perhaps the focus should be on the training issue. What training strategies are most effective for educating all counsellors about possible and inevitable differences, and for developing the skills of knowing what to ask and how to ask it (Krause, 1998)?

Finally and tangentially, I found Aupilaarjuk's brief discussion about the difference between belief and knowledge extremely interesting. There is much emphasis currently on incorporating traditional knowledge into a variety of fields,

a direction that has generated discussion about the difference between 'knowledge' and 'belief'. A deeper exploration of these concepts might be of interest.

Appendices

Appendix 1: Consent form

Participant Consent Form
Marja Korhonen, Box 345, Iqaluit, NU

Inuit Helping Strategies and Western Counselling: Culturally Relevant Practice

I am doing research about counselling techniques that are helpful for work with Inuit clients. In this interview, I am interested in learning about your experience or expectations of receiving help with personal problems. I will not ask you about personal details of problems you may have had, but I am especially interested in finding out things like:

- Your ideas of what a helpful counsellor is like as a person
- What you would like someone to do if you ask for help with a problem
- Your opinions about how helpful or unhelpful certain techniques are
- Actions or attitudes that you have personally found to be helpful or unhelpful when you have talked to a friend, elder, minister, or counsellor about a problem

This information will be part of a university paper. I also hope that the research will result in a counselling manual that can be used in the communities.

I will do the interview with you at a time and place of your choice. The interview will be recorded on audiotape.

If you are willing to be part of this research, I ask you to read and sign the section below:

I have been fully informed of the objectives of the project. I understand these objectives and consent to being interviewed for the project. I understand that my name or any other identifying information will not be made known to anyone unless I agree to be identified. I also understand that if I want to withdraw from the study, I may do so at any time.

I understand that the interview will be audiotaped. The tape will be heard by the interviewer, and by her examiner in England only if necessary. The written copy of the interview will be included in the university paper but without any identifying information unless I agree to have my name used.

I also understand that information I give in these interviews may be published as part of an article or book that might result from the university paper.

I do not want my name or any identifying information to be used _____ (initials)
I give permission for my name to be used _____ (initials)

_____ _____
Name (printed) Signature

_____ _____
Witness signature Date

Appendix 2: Interview questions

SEMI-STRUCTURED INTERVIEW QUESTIONS:

Would it ever matter to you if the helper was an Inuit or a *qallunaaq*? Why/not?

Asking for help with a problem can be difficult. It can make people feel nervous and uncomfortable. If you were nervous, what could a helper do to make you feel more comfortable?

How important is it to you that the helper understand you and your particular problem? Why/not?

*How would you know if a helper really understood you and your situation? What kinds of things would the helper be doing that would let you know they understood?

Some helpers give advice, tell you specifically what to do. Others give some ideas about different things that might work, but then let you decide what you want to try. Which one of these techniques would you find more helpful? Why?

In your experience, what kinds of suggestions or activities have you found helpful when you have a problem?

Some helpers really encourage a person to talk about their feelings. How do you feel about expressing feelings? Do you think it would be easy or difficult for you, helpful or unhelpful? Why?

Try to think of a time when you really had a problem and someone was really helpful. You do not have to tell me what the problem was, but try to remember: What kinds of things did the person do and say that were so helpful?

Again, try to remember when you had a real problem, and the person trying to help really didn't, or maybe left you feeling even worse. What kinds of things did the person do or say?

Based on these things you've talked about, can you kind of summarize what you think a counsellor should do in order to be helpful to you?

Can you summarize what the counsellor should not do…things that would be unhelpful or would 'turn you off'?

Is there anything else you'd like to mention that we haven't talked about…something else you'd like to add or change?

Appendix 3: Interview Transcripts: Younger Inuit

Informant A

M: I'd just like some ideas about what you think might be helpful. I'm not going to ask you about any particular situations you've had, unless you want to talk about experiences you've had. But just your ideas generally. And the first thing I'm curious about is whether it does matter to you whether the counsellor is *qallunaat* or Inuit.

A: No.

M: What *would* be important to you?

A: Someone who has personal experience. Like if I had a problem, I'd like to be able to talk to someone who had a similar experience.

M. OK… So you feel that they would be able to understand……

A: Yeah.

M: How important is it for you that the person understand…?

A: Extremely.

M: How would you know if the person really understood your situation? I know that part of it would be that they would have gone through similar things, but everybody's experience is still a little bit different…

A: Yeah…

M: …so how would you know…What kinds of things could the person do to really make you feel that they did understand?

A: Well, I would talk about my experience first and see if they had anything similar that had happened to them. If they did, let them talk about it for a bit…. Then…kind of base it on that.

M: OK…. Anything else? What if their experience wasn`t exactly the same as yours…similar but…

A: What if…?

M: Kind of but not exactly. What would you want the person to do, or would it be enough that they kind of had a similar experience…

A: Yeah.

M: That would make you feel comfortable?

A: Yeah. And when you're in a small town, you know what happens to people.

M: Yeah. (Both laugh) Everybody knows everybody's business anyway.

A: Yeah. That's not very nice. (Laughs)

M: But it's true…one of those things that happens in a small town. Which is actually another question. What about confidentiality?

A: I think it's important too.

M: Yeah…

A: Because I wouldn't want my dirty laundry aired in public.

M: Yeah. So whoever you talk to, you'd want to be pretty sure that…

A: Yeah, that [unclear]

M: That it was someone who didn't have a reputation for talking and so on…

A: Mmmm.

M What about feelings? Some people are really comfortable talking about feelings; other people aren't…

A: I`m not.

M: You're not. So are you saying that you would prefer that you not be kind of pushed to talk about feelings?

A: Yeah. Yeah. I just end up crying and stuff, and when I start crying I get frustrated and that gets me angry…… I don`t like it. I don`t like talking about my feelings.

M: OK…… What kinds of questions could a counsellor ask you…Not ask you about your feelings, but what kinds of things would be helpful for you to talk about?

A: Hmm. I don't know…I never considered that… Life in general, I guess.

M: Yeah… Just generally what's happening?

A: Yeah.

M: OK…. What about getting suggestions or advice? And there`s a difference between advice. Sometimes advice is kind of, "OK, A, this is what you <u>should</u> do…

A: Mhmm..

M: …whereas other helpers might say, "Well, this is what I did, but, uh, I have some other ideas…" and maybe give you some suggestions. Do you want…Would you prefer to be told what to do or would you prefer to kind of make up your own mind? To choose?

A: I'd like to be able to make up my own mind. They shouldn't say, "You shouldn't do this" because I'll end up doing it. (laughter) I think I`d do the opposite. And I haven`t had any parental advice because both my parents are dead and … My brother tells me what to do sometimes but I never take it seriously. I run my life and you run yours and I`m that kind of person…and if elders tell me what to do, I'll tell them, look, I haven't listened to an elder in a long time; it's not time for you to start talking to me. Stop treating me like a kid. I get very very defensive…You know, I start saying "You're treating me like a little kid…." So…

M: What kind of things make you defensive? Being treated like a little kid…

A: Patronizing…. Or….like if they start saying things that…. …it`s hard to put in English… …I don't know how to put it in English….I would have trouble translating this (laughs)…. …Say it in other words.

M: OK….. You would feel defensive or you would get mad if someone treated you like a little kid, or was patronizing…

A: Yeah…

M: Are there any kind of reactions from the other person that would make you mad or make you defensive?

A: If they said, "Well look, it's this way…..You have to do it this way because it's written on paper…" ….Looks easy on paper but it's not in real life…so…

M: So you're saying that if they kind of say you have to do it like this…you know, "This is the way it's supposed to be done…"

A Yeah. Or if they say OK this is what the manual says…Like, you have to look at the personality. They'll say I'm clinically depressed or something…

M: OK….. That takes me back to the understanding part…what I`m understanding from you is that the helper would have to pay attention to who you are…

A: Yeah…

M: …and what's important to you, and your life, and your ideas…

A: Umhm…

M: …rather than just kind of some abstract stuff of how things should be.

A: Yeah.

M: OK. … would it be helpful to you if the person was able to give you some ideas like… you could try this, or you might try that, or, you know, how do you feel about this…?

A: They don`t…Yeah, I'd probably look at those alternatives….

M: Yeah…Just as alternatives but not as …?

A: Not as "You told me to do this…I`m going to do it…" I`m not going to do that.

M: So your choice…

A: Yeah.

M: Alternatives but then you get to choose what you feel is best for you…

A: Yeah ...mmm.

M: OK….. Specifically, can you think of a time…and again, I don`t want any details…but can you think of a time when somebody really was helpful to you, and what kinds of things they did do or say that were helpful?

A: Well, growing up here, I guess, can help them. Like [name]…[she's] good….I'm very comfortable with [name]. But not with [name]. It depends on where they were raised and if they understand our background and stuff. Especially growing up with them and everything.

M: Yeah…

A: Being around us. So they have a sort of an idea of how we were raised and how our personalities are and stuff.

M: So it's important to have some kind of background knowledge about…?

A: Yeah, the north.

M: The community, and the north, and the culture, and that kind of stuff.

A: Some….some will…When he [referring to her son] was at the hospital, they have a psychiatrist ward up there…well, not a ward, but they have offices up there…and every time I talked to them, I would talk and talk and talk, and they wouldn't give me advice, but they would just say "Mmmm, is that how you feel?" You know? And that's patronizing.

M: OK, so…

A: That`s not helpful. I don`t like talking to them.

M: Yeah…How would you have preferred that they react?

A: In a normal setting. Not, you know, "Mmmmm." "I was trained this way…" You know? I got that impression.

M: So kind of like they were applying a style…

A: Yeah…

M: …rather than paying attention to you as a person.

A: Uhhuh. Yeah. They tried helping me like, when he [her son] got sick, I wanted to know my father's background, I was trying to do a search for my father, my natural father…to see what kind of, to see if I could find him to see what kind of medical history they had so he won't get it….so they were helpful that way. You know, making me use the computer for Internet things…

M: Yeah…So giving you some specific kind of guidance, some real things that are helpful rather than just 'uhhuh, uhhuh.'

A: Yeah.

M: Any specific kinds of things….There's all kinds of strategies…everything from looking at your dreams, to looking at your thoughts and thinking about consequences like 'what would you happen if you do this', or, uh, writing things down…there's a lot of different strategies. Is there anything that you think might be most …that would appeal to you as a helpful technique?

A: On the land. On the land you find yourself. Being by yourself…solitude, solitude…helps…you figure out stuff…But then, I was this small when my mother started taking me out on the land, so it's in the brain.

M: That's kind of…just the peace, and being able to think things through…

A: Yeah. Or doing something creative…..I like to solve my own problems. Sometimes I don't go for help.

M: Yeah…And lots of people are like that. …How DO you solve your own problems?

A: Thinking. Walking around. Financially, it's a big problem too, to stay home. That's one of my little problems. I'm not scared to ask for food anymore.

M: That's a real practical thing…

A: Yeah.

M: But basically, then, you prefer to think things out yourself, hopefully do something peaceful and think about it, and then figure out where you're going to go from there….?

A: Mhm. I've been trying to…I applied for child support in July, but I haven't heard from [the court office] to see if my application …I went to [name] and she didn't know what to do, so that's one of the problems I haven't solved yet. I was thinking of [talks about a few of the possible steps she could take to try to solve this problem.] There's all these agencies and stuff, but you have to make appointments…that's one of the downsides of it.

M: OK, that's another thing too …making appointments then, because that's often….If you were to go for help, you'd have to make an appointment and probably go to somebody's office at a specific time and such. Would you prefer then to be able to approach people on your own time, when you feel….?

A: Yeah. Seems like problems intensify when you're alone at night…but then you just sleep them off…and there's really nobody there. That's one of the problems they have to fix here.

M: Yeah…Would it helpful to have somebody that you could kind of call at any time…?

A: Yeah

M: ….of the night. Have a kind of helpline [brief comments about the local crisis line as not the same: ends at midnight, different problems]…but a general kind of helpline…?

A: Yeah.

M: Anything else that you'd like to mention? I don't have any specific questions....We've kind of covered some of the things I wanted to know about, in terms of counsellor techniques, and how people should approach you and stuff. And what I've gotten from you is that people need to. should look at you as a person, as an individual (A: Yeah), look at you as someone who's grown up in a specific kind of culture and background (A: Yeah) ...because those things have an influence on you..... Not push you to talk about your feelings. (A: Mhm) Not push you to DO, that you <u>should</u> do something, or do things a certain way....but to give you some choices and then let you decide what's best for you ...?

A: Yeah. Sometimes Social Services, they ...barge right in. And I don't like that.

M: What do you mean by 'barge right in'?

A: When he was at the hospital, we went AWOL. I didn't want to go back up. And the hospital sent Social Services over. And I told them you're not coming in. You can bang on my door all day long....And next thing I know, they had the police and they knocked down my door....splinters everywhere. And then I started screaming. And at the hospital the nurse says, "Look, you're hysterical!" "I'm not hysterical! I'm mad!" You know? "You have to differentiate between the two. You're not gods! You're human just like I am."

M: What would have been better? How could they have handled it better?

A: Not sending Social Services over to try to take my son away from me! ....So.... I told them, "You can take my son and take him to the hospital, but I'm not leaving without someone coming over and fixing my door. And they gave me the run-around. They told me to call the cops and I called the cops and I told them, "Look, you broke down my door. It's your responsibility...it's your responsibility to fix it for me." And they said, "No, we're just doing our job." They told me to call Social Services. So I called Social Services and they told me, "No, call the cops." They gave me the run-around and that got me even angrier. So...Social Services and the hospital finally said they were going to fix the door. But that...left me in a teary mood all week. That they have the power to do that....And [name] was the only one who said, "Look, I know what you've been through. And ...I know all the stress and stuff you've been going through." But she didn't bother telling anybody else...what she knew ...That pissed me off.

M: So that was important to you that she understood…but…

A: Yeah. She should have communicated with all the others. And then [name] came and I was very angry, still very angry, and I pulled the door, and she was, like, "Oo, scary woman." And I was…because I knew she felt that way towards me, I was, you know, fuck off…So she avoided me from then. But then after we came back from Ottawa, she was very helpful. I think she got my history from someone else.

M: So the fact of them knowing your background and being…I'm going to use a counselling word, 'empathetic'…being understanding of what you've been through. (A: Mhm) So it would have been more helpful to kind of take [name]'s kind of stance…"I know what's been happening" and sit down
(A: Mmm) and …"where do we go from here…?"

A: Yeah.

M: And then it was better once they did?

A: Yeah. And they know I'm not going to hurt my son or anything. I just got tired of the hospital because they weren't doing anything for me. And I was there from morning until he fell asleep at night.…And they were really into paperwork, and they would always say, "You have to make an appointment with us," because they're right at the hospital and you can't just approach them, you have to call them first. And that wasn't very helpful. And I wasn't the only mother stressed out…and they were only helping me, and they weren't helping the other mothers around my area. ….So they should have a better place to help.

M: Would it be helpful for you in those situations, if someone made an appointment to come out and see you, rather than you having you make an appointment to go out to the office?

A: Or they could just say, "Do you need help? Can we talk for a bit?" They should say that.

M: So just kind of more …..

A: Personal….

M: Yeah….personal and helpful … rather than just bureaucracy? (A: Yeah.)…. You mention paperwork…..

A: Yeah…. And they thought I was a drunk, and I haven't drank in 2 years, and they were telling me "If you drink, your problems are just going to get worse." You know, geez, the thing is, I don't drink. Don't do that.

M: So making assumptions, or …

A: Yeah. They were going that I did all these bad things.

M: Had they asked you about that?

A: No! Never! They just came out and said it. And when we were going to be sent to Ottawa, they said "You better not go AWOL and go drinking." "I don't drink! You guys better quit assuming that I do, because I don't." And they did it about 3 times. It was awful….and all because…..

M: So even after you had told them…?

A: Yeah. So they shouldn't …They should communicate properly…….What else…? After we got back from Ottawa everything was fine. They started treating me like a person.

M: Treating you like a human being…

A: Mmmmm…

M: Have you still got any involvement with them?

A: No. If I'm not asking for their help, they shouldn't come around offering you their help.

M: So if you want help, you'll ask for it.

A: Yep!

M: And if you don't, it means …

A: I'm fine!

M: You're OK on your own…..

A: You know, I was saying that if I need help with something, give me a baby-sitting service for a few hours a week. [Some personal chat…recorder off.] The psychologist in Ottawa was really good. Oh, she treated me so nice. She came down and told me that she worked in the psycho…not the psycho…that she was a psychologist…for children and their mums. She would come in with me and [her son] and she would observe us together. And she would tell us…she would tell me…how I should handle that situation. Like he refused to eat. And she told me not to talk to him, just keep feeding him and stuff. And that system worked. And he's eating now. And she was so good. Like she told me about all the things that she had and what background she had, and her family life and everything. It was nice to know…she…

M: So you got to know her as a person as well…

A: Yeah. Umhmm. They should do that here.

M: Rather than just coming in as the …

A: Worker. Mhm.

M: When she told you about… what to try with him…she was telling you to try this and try that, and you obviously were willing to try what she told you. What was different in her telling you? Did she…Was it the way she…?

A: The way she talked. Like, she was very very calm, and she relaxed…I don't know how she did it, but she relaxed you first… …She would write down what we were doing and evaluate it for me. She would explain to me her theories, what will work with [her son] and stuff. And she was well-trained, eh, and I told her she should come up here. Cause we don't have that, those kind of services here. [Private comment]. She was just a very…nice person, and you could relate to her.

M: Yeah… So, she kind of like let you know her a little bit, and listened to you….? (A: Yeah.) And was it helpful to you when she explained why she had…like you said she gave you her theories about what you might do and so on. But she explained things. Was that helpful that she gave you a chance to kind of be part of…(A: Yeah…mmmhmmm.) …discussing and understanding…?

A: Yeah. It was nice. It was…she …the way she did it. it made sense. that she would explain it and not talk to you like you were a little kid. I think that's why I did like her. I saw her, like, 3 times a week or something. I gave our background, and I told her that I was tired of being in Ottawa. And she says we'll observe [her son] a few more days. And after she evaluated, she said [her son] and I can go home…because he was maintaining his weight…so…I think… it was because of her that he started eating properly, and like, when I fed him, I would ask him "Do you want this, do you want this?", and she told me "Don't do that. Just tell him that you're the boss, and if you're going to feed him, that's what you have and that's what…he has no choice but to eat it." And that worked.

M: But again, you were part of the process, eh…(A: Yeah) …rather than just being told…?

A: Yeah.

M: Did she understand your feeling that you were sick of being in Ottawa, that you wanted to come back home?

A: Yeah. I told her that Ottawa is just all concrete…I want to go where the rocks are.

M: Real rocks, not man-made rocks.

A: And I was telling her, you know, in the summer, that we have a really short summer, that we have about 2 months of summer and we were missing all the fun. We go berry-picking, clam-digging, boating, and we don't have a chance to do that all year round. And I think she understood that we do have a very short summer… and I wanted to be around nature. There's a lot of nature there, but it's different.

M: And you can't get out to it as easily…. So she didn't just tell you "Well, that's too bad. You have to stay here as long as we want you." She took your feelings into consideration?

A: Yeah.

M: Are you still using techniques that you learned from her?

A: I think it's ingrained now.

M: So it`s just part of how things work with you and [her son]…

A: Mmmm. Like he's very independent when he wants to be…. And he started to understand English when we were there. and I told her I don`t want him to learn English.

M: He'll learn that soon enough….. I`m glad that worked out for you…I know how important [son] is to you.

[Tape stopped…a brief part missed, where A started to talk about preferring someone who is close to her own age.]

M: One more question. Do you think that age matters then?

A: Yeah. It matters to me because they should do age to age. I don't want to talk to someone younger than me. Like a lot of social workers here are younger than me, and they don`t …I don`t think they have experience, full experience yet as an adult. And this, the psychologist in Ottawa, she was in the same age group, and I think that mattered. So….I wouldn`t go to an elder. I would go to someone within my age group.

M: Who you know has about the same experience, about the same length of life anyway. You mentioned earlier that someone having the same experience is important to you. Did that matter with the woman that you were talking to down south?

A: I know she didn't come from the same cultural background, but I think her experience, in life, was something that helped. Is that the word?

M: Yeah, I think…I think I know what you mean. The fact that because she was a similar age, she had knowledge about the same kinds of issues that you were concerned about. So it was the knowledge…..

A: Yeah. It doesn't really matter about the age, but I would like to talk to someone who's my age group or…Not an elder. Well, I never really grew up around elders, so what I think is that they're senile…… [Laughs] Oh, I don't really know.

M: Would it make a difference, in terms of the elders… the fact that their life was so different from what your life is like?

A: Yeah. From my life.

M: Even if they have more years of life, their experience is ….

A: Yes. Is different. From mine. They grew up with *qamotiqs* (the Inuit dogsled), and the white man came. They've been here a few years but… I grew up when there were already white people here, and they're no different from us. With elders… they revere them, and I don't. So that's different. …And my parents were fairly young when they died, so I didn't really grow up when they were older…. Sometimes I'm glad that they died when they did. Otherwise, I'd be a weakling. You know. I'm not a weakling. But… I'd be very controlled. That's the way I see my peers. They're controlled by their parents, and I'm not. So that makes a difference.

M: So you had a chance to be more independent…(A: Yeah) Everyone's different…

A: And I know he's going to grow up differently. I know [unclear].

M: People have different personalities (A: Yeah) and ways of doing things…you mentioned he's already independent.

A: Yeah. But he's a cling-on.

M: But an affectionate cling-on. [Some interaction with her son.] So…anything else…you want to add, or…

A: Or have you forgotten anything?

M: I don't think so. Though we could probably sit here for the next 5 days, and I'd be saying, "Let me start the tape again." [Some laughter, chat, leading to…]

M: Did the woman down south have kids?

A: Yep. She had a son too….. I think that mattered too.

M: Understanding what it's like to be a parent kind of thing?

A: Yeah. Though she wasn't a single parent. She was saying that it's really important for a child to have 2 parents. Well, he does have 2 parents. We're

just not living together. So…I don't know where they get that idea that you need 2 parents to raise a child. [Laughs] You need a whole community.

M: So did it bother you when she said that a child needs 2 parents?

A: No, not really. I don't know why it didn't but she calmed me down. I think she was trained in hypnotism or something. [laughter].

M: So the way she said it or something (A: Yeah)… it wasn`t like a criticism (A: Yeah) or…it was just…

A: Yeah. And I gave her the father's background so she sort of understood….so she said she was going to keep in touch with the social workers here. So… When I got back here, the social workers were saying they would be able to relocate me. But I don`t want to move. This is my home city. But then that`ll have to be an option if it keeps happening. [Personal chat, play with her son for a while]

M: OK…… Thanks ….

A: *Ilaali*. [You're welcome]

Informant B

M: So again, the first question I'm interested in… I know you're very strongly traditional and proud of being an Inuk…if you were to ask for help, would it matter to you if it were a *qallunaaq* [non-Inuit] or an Inuk who was helping?

B: I guess it would have to be how I feel. When I think about my mom, I usually go to an elder. And if I'm struggling over my kids, sometimes I'd go to a *qallunaaq*. There's this lady I know, I really depend on. She`s an Inuk. She never gives any lectures. She'll just say very nicely.

M: So first of all kind of depends on what the problem is, as to whom you might go to.

B: Yes.

M: But it's interesting that you mentioned about the person you do depend on, that she doesn't give lectures. What does she do that's helpful? What do you mean by a lecture, first of all?

B: If I tell her how I feel inside about my dad, she'll tell me to say how I feel. She'll just make me express…If I need to cry, I'll just do it on the phone…or I'll go to her. And it's just …automatic. And if I don't want to talk, she says she'll be patient enough to wait…and listen.

M: Until you're ready?

B: Mmm.

M: The thing about feelings… is it important for you to be able to express your feelings?

B: Yeah.

M: The reason I ask that is that some people will say they're not comfortable talking about their feelings, and that they don't want someone asking how they feel. But other people think it's really important to be able to express your feelings.

B: I find…when I`m not feeling happy. I`ll try to cheer up. If I can`t. I`ll just scribble. If I don't want to talk to anyone. I`ll just go for a walk. Or I`ll do something, to get out of it.

M: How else do you try to get cheerful? You said if you`re feeling bad. you`ll try to get cheerful.

B; I'll listen to some music that will cheer me up, or maybe take me back. It`s like a little dream coming true. I'll dream that I`m sleeping and that I'll be OK. I do a lot of self-talk…that helps a lot…or walking or hiking.

M: Just that peaceful thing…What other kinds of things…say this woman who you depend on, or anybody else who`s been helpful….First of all. let me ask you…It's hard to ask for help sometimes. Have you ever been in a situation where you were really nervous about asking somebody for help?

B: Yeah. A lot of times. Today. if I need help, I`ll just go. But before. I`d just say, "I don't need help. I`m OK." I'd do a lot of self-talk. And I would say. "I think I need help" but I didn't know who. So a lot of times… I was quiet. Or I'd say I'm sick, and take a break…from everybody. Even the phone. I'd just say…lot of self-talking. But this person taught me, if you need someone to talk to, it's better to get it out now. Don`t save it till tomorrow. next week, next month, because you won't know where you`ll be. Next week, next time, next month. So that really made me think…so I would try to find someone. But a lot of times I found it really hard. I think that`s why a lot of Inuit people say, "I'm OK" but they're not OK, inside. And I got to believe myself that I AM OK….because a lot of times people say they`re OK but not inside. And it wasn't scary, to say the truth. Or embarrassing. I used to think I was the only one, with a problem. And later on in life…we all go through the stages.

M: Yeah…You realize other people…

B: Mmm.

M: What does this woman do to make you feel comfortable talking about your problems?

B: I'll get on the phone and I`ll ask her if she's alone. She says, "Yeah, I`m alone…or, your uncle's here, or your aunt is here…" It depends who`s there. But a lot of times I'll just have a quick talk, like you and me. And she'll ask me, "What made you think that way? What were you doing..?"

She's really good, in asking. Like I know her now and she knows me. The tone of my voice…she'll notice right away if I'm not happy, or if I am happy. She'll just ask me. And she'll explain that when she was in that age, she went through similar. So she explains what I`m going through. And she doesn't have parents, and I have no parents. She understands.

M: So she'll ask you questions that help you kind of express things, and she`ll open up about herself, and say how…so that you can understand. Is that an important thing for you, that she understands what's happening with you?

B: Yeah. If I don't say anything, she'll know…that I`m too busy, or that I`m not happy. But she knows me, a lot now. Before, I thought that she didn't know me. But when I'm not happy, or struggling, that's who I can call. Like automatic. It makes sense.

M: I think I understand what you're saying…that it`s kind of, you know that she knows you and understands you, and you can talk to her and she'll understand and try to explain. (B: Yeah) What about the confidentiality thing? You were saying that she`ll say your uncle's here or somebody…how important is it to you that what you and she talk about is…Does it matter if she tells anybody else or…?

B: She's pretty confidential. She'll say, like, this person wasn't happy, so just accept him the way he is right now. Like if someone`s acting up, in the house, or if somebody`s grumpy …so she`ll say he had a bad day, like she'll just explain not to be concerned. And if I have concerns or questions, I'll ask her husband. And he seems to understand.

M: So they're both helpful to you.

B: And they usually ask me how my husband is, or my kids, or my family… [a few words unclear]…they're like a family. Even if I`m hungry, I`ll just go there. She's like a mother to me.

M: So you can really kind of depend on her for…

B: She depended on my mum, and she will tell me, "You had a great mother. You had great parents." She's the one that really encourages me.

M: I want to ask you about advice. And there's kind of 2 different kinds of advice…like the kind where someone tells you you have to do this or you have to do things this way. Or then there`s the other way, of saying you

might try this or you might try that. Which is more helpful to you? To have someone say, "OK, this is what you should do." or to have somebody say, "Well, here's some ideas, and …think about which you'd like to try…"?

B: I usually try to say what I went through. Like for example, when a person has a long labour, it seems to be that this person wasn't doing enough for herself physically. Like my mum used to tell me, you've got to keep moving. You're not supposed to sit and lie down in your bed. And when we go to the doctor, it's the other way. You're supposed to rest. So…my mum used to tell me, "B, you've got to be active. I don't want you to have a long labour." So, it makes sense. And I usually tell them, "You're struggling with your partner. Did you ask them? Did you talk to them?" And a lot of people will say, "No, I can't." And then I'll say I was in that situation before, and I had a very hard time talking to my partner. And I would tell him, "I'm having a hard time. We need to talk." And this person will say, "I say that to my wife, or my boyfriend, and they never listen to me." And I tell them he is listening or she is listening. And in the long run, it's going to reflect back to you. And that's how I used to try to help.

M: So again, kind of disclosing what's worked for you…(B: Yeah.) What happens if a person doesn't follow…or if someone tells you that "you should do this"? What if it's really something that you're not comfortable with? Doing?

B: Maybe someone else…I'll tell her, maybe if you talk to this person…Like last week, this person needed someone to talk to, and I didn't feel comfortable. So I recommended these 2 couples to someone.

M: So there was a choice, they could talk to…

B: Yeah. Like Iqaluit is very big. It may be big but there is a lack of people to talk to. So I try to have someone, not close to me, not my relatives, someone who works maybe in the mental field as a lay reader, some counsellor, someone like this. Like people know certain people…I try to recommend them to people who are working…

M: And people who you think they might be comfortable with…

B: Yeah. Like a couple of weeks ago, this person lost a member of their family. And I wasn't ready to talk about that, so I told her I'm in that situation right now…and I recommended these people to another person. And I follow up on them…last time they said that it was helping. I usually

make sure they're OK. and that I`m still available. even just for a quick chat.

M: What's the most helpful thing for you personally? You mention the fact of. you know, being able to express your feelings. and you mentioned that you use self-talk…Do you still use self-talk, by the way, for yourself? (B:Yeah.) You mentioned that having somebody just listen and understand what you're saying, and show that they understand your situation…Is there anything else, any other kinds of things that you've found really helpful?

B: I found very helpful in the past, for these couples…they weren't really connecting but they were trying…so I told them maybe to talk to this person, maybe it would help in that situation. I told her it would help if you guys talked together, that they have a third person…that it helps. I tried that myself and it helps. That it's really hard just for the wife and the husband, or the boyfriend and the girlfriend, or the common-law, to talk and they can't seem to understand.

M: When they're talking directly?

B: Yeah. Or I tell them to scribble, to do a journal. I tell them to do a journal, even just once a month…once a week. To try it out. That`s usually my recommendation.

M: And those are things that have worked for you as well.

B: Yeah, they have.

M: What kinds of things do you think a counsellor shouldn't do…and again, from your experience. What kinds of things would make you feel nervous or defensive or just unhelped.

B: Ummm…I don't know. As long as they keep the confidentiality. That's the first one. Like there's a healing group that goes on, and I always tell them that I don't want this written, written in a diary or a journal. I don't want them to know what you were doing yesterday…I mean, I don't mind if they know where you were yesterday, as long as we don't say anything about it.

M: To others?

B: Yeah. I usually say, not to be written, not to be recorded, and not to be discussed. Those are usually the ones I usually say about confidentiality.

M: So the confidentiality is a big issue, and that would be difficult if you found out that somebody…

B: Because somebody…when I was at Northmart, and I was trying to get a Lotto, Lotto 649, and then this person said…all these people…there were maybe 3 people behind me…and this lady who works at…said, "I need someone to talk to. Someone told me I can talk to you. Can we talk?" She was very open, she was in crisis. But I told her to slow down, and to [word unclear]… but I've been seeing her outside. She seems to be OK. I thought that was a … good to hear, after being in a field like this for a long time. But confidentiality is very strong. And today, we're really noticing that it's important. Because before, we really didn't think …it was confidentiality but we didn't take it seriously. We lived in camps and who we wanted to talk to… the person we could trust. Before, like it wasn't so important. But it was. I think we are getting to understand what is right and what is wrong. What makes sense or what doesn't.

M: And in the elders interviews, all of them were saying that confidentiality is important, and you need to be able to trust that the person isn't going to be talking about your problems. So the elders are saying that now as well.

B: My mum was an elder, so I think that's why I really relied on the elders, even after she was gone.

M: Yeah. And that's always, I know that's always been helpful for you, to be able to go talk to the elders.

B: And they usually explain when they were kids or teenagers, this is what I went through…I think that's why I like to hear…what they do and what they went through.

M: Do you always follow the suggestions that they make?

B: Not all the time. I would pick out…what I can remember. And I try to follow.

M: But it's still helpful that you can know how they handled things and what they went through, and it gives you some ideas?

B: Yeah. Cause I went to go see this counsellor, a long time. And I had to ask this person, if he ever went through this trouble I'm going through. And he

said he hasn't gone through that. And I said, "Then you don't understand what I'm going through." But he did say that "I understand what you're going through, in a different way," so that was helpful.

M: Was he able to show you that he did understand? Like, did you believe that he did understand?

B: Yes. In a way. Yes and no. Because it was like me testing him. Then I said, I wouldn't want to be tested if I was being a counsellor to this client. So you have to really think….

M: Yeah…But you did believe that in a way he did understand. (B: Yes.) How did he…I'm going to get back to that…What did he do to show you that he did understand?

B: I would ask him. I would how do you know how I feel? And then he would say, "You don't look happy…you're not happy," or "You look happy today. You're more cheerful. You had a good weekend?" I would always ask him what I just said, and he responded to what I said.

M: So you were able to see that he was able to…

B: Get the message….It was good. But I notice Inuit, they'll talk to each other in Inuktitut. In some way we don't want our kids to understand everything. But then we want them to understand everything. That's why I've been confused, about where I was going to go to when we're in crisis. Because my mother said you have to say what you feel. And then this person will say, "Only if you feel that way. Just say what you feel only when it comes to the point." So that's why I got confused.

M: Yeah…people kind of saying on the one hand, say what you feel, and the other one saying you don't have to unless you really feel like it.

B: Yeah. I would say I think I'm going crazy. But then in the back of my mind I would say, no you're not, no you're not. I think that's why self-talk is very helpful. So when I'm trying to help, when I'm listening to somebody, I'll try to say what they're saying. I make sure they understand… or I understand.

M: So not only does it help the other person, but it also helps you to understand yourself? What you're thinking and saying?

B: Mmm. I had a phone call. This person`s kid was taken away by the RCMP, and they took him overnight. And we managed to drop by this person's house, and she finally said, "I finally understand what you`re going through." And all that time I was talking to her…not all the time…but once in a while. For one of her kids was taken away by social services, and she thought it was easier and it wouldn't change her life. Until she went through that. [Note: This refers to similar experiences in B`s own life, prior to this event.]

M: And understood… how it was for you too.

B: Mmmm. So I really try to make sure I…that [this person's family…. ? Unclear on tape.] Like before, if a family member died, I'd go to them because they were grieving. But then when we lost somebody in our family, I realized that grieving is much better than hiding it. Like, lots of times I'd go to the family, and there would be grieving. But just for a little while. And I thought that's how it was…But we can grieve…it depends how long, and how short. So I learned a lot. Slowly. From my own. I can only say from my own. ….So it makes sense when that person is going to have a long delivery, because she wasn't doing…like not doing enough active. Because I had a long delivery, my first one.

M: Didn't follow your mother's advice…

B: No! It really makes sense. And then I was glad I only have one daughter….she's going to have a baby in the future sometime and I want her to have…..

M: Get her to walk around all the time…Have you ever tried to talk to someone about your problems and found them really unhelpful? Like, somebody that you wouldn't want to talk to again? And I don't want any names or anything like that….

B: Maybe when I was a kid at school. When the person doesn`t understand what I said…. she`ll just be daydreaming, or she'll be doing something else …..It's like talking to the wall, sort of. And that's when I…I didn`t realize till later on, but I was asked to talk to that person, and they wouldn't remember…so that's when I started to realize…But not all the time. Like talking to our partners sometimes….you can talk to them, on and on and on, and they'll say "Yep, no, no" and then you'll ask them tomorrow, and they`ll say "I didn't hear that."

M: I've had that experience.

B: So I know I was talking to a friend of mine, and if I'm thinking about someone in the past, who's lost.... I'll say...I'll try to cheer up this person, and say,"Look we were kids one time. We had fun." Like if this person who is not paying any attention, I'll try to cheer up this person. But a lot of times, I spoke to some people too, and they [word unclear] ....and I said, "Oh, I tried." I also learn by trying. You can try and try...and you really learn...

M: Try different things and different ways....?

B: Yeah. Umhm. Because my late mum said, if you learned that time, then something did make sense. And I used to wonder why she would say that. That's when I was learning.

M: And then maybe not realize until later...?

B: Yeah. Like, making bannock or cooking. If there's no salt in that bannock, you're going to know that something's missing. And that's what she would say: If something is missing, that means you know you're doing something right. And I would ask her, "Why do you say that?" Because if it didn't make sense to me. But then in the long run, it did. Later...

M: You think about it and...That's true when we're young, often, eh...things don't make sense until later...

B: Yeah...I was really close to my late mom, and she when she made bannock, she always had all these items, ingredients, together, and if she forgot one little thing, like the baking powder, it's not going to rise...Like, it should have been ready about 15 or 20 minutes ago...and she would check the oven, and if it's not ready she would know, right away, there's no baking powder...because it didn't rise. So I used to think she was a magician. That's how we learn.

M: Just knowing how things should be, and when they're not like that, then you know something's gone wrong....

B: Yeah. Like, during a test. If you didn't study, you don't really learn...and you're not going to know the answers to the questions..... It makes sense. Like if I talk to my friends who are in late 30s, that's what our mother was trying to tell us. That's what our father was trying to tell us. And it makes

more sense now when we have our own kids….because everything seems like it's [word unclear]…

M: And you see similar things happening…..

B: [She was helpful because I had them? This was unclear] …I spoke to both of them on the weekend so it was helpful because it gave me more hope. If I'm starting to tighten, that's when I know I need to do something. If I'm not walking around town or going on hikes…We know when we're getting sick…It's because we're doing the same old thing…..

M: So just that kind of staying aware of your own self and your own body….and….

B: Your appetite…..

M: Yeah…..And then doing what you need to do……

B: Mmmm……But I always make sure somebody is reading the Bible….. I don't think it has anything to do with Bibles. Because on our way to work, this person said, "I didn't read the Bible" and it was like we were lost …and then we said a little prayer, on our way ….and we felt more comfortable.

M: I know that religion is very important to you, and that's like a major source of comfort to you.

B: Yeah. It is. Yeah. And with all the things going on this summer, we gained a lot by getting hope from other people. To encourage people. "You're going to be OK." They can hear that little message saying "You're going to be OK." You've got to slow down. You've got to take it easy. Because sometimes I have to tell somebody…like we know when somebody's rushing [panting]…and they say "Something's wrong, something's wrong". I usually tell them, "No, nothing is wrong. You have to take it easy." It's that believing. Believing in ourselves. It's the most strong thing. Because when I don't believe in myself, that's when I start to lose hope….

M: So always keeping in mind that …I can do this…I can…..

B: Yeah. Psychology.

M: And helping other people believe in themselves….

B: Mmmm. Like I'll see people who don't look happy. And I'll say, "Look at today…we're given another day. Now think about today." The past is gone….And when the past really goes away is when you talk about the past. Because making it all go away, you feel something inside….

M: So you talk about it and then you can kind of…..go on…?

B: Yeah. To go on. After I found out which person lost her mother, then I realized losing my son was a different… feeling. Like, we have different feelings for all our family, our relatives, our friends… I think that's when a lot of elders will say, "Did you lose your wife? You're going to find life very hard." I've never been there, so I don't know, but they always try to say if you lose your husband, you're going to find a change of life. I haven't been there, so I don't know what they're trying to say. But when somebody says, "I lost my daughter, and it was so hard…" …and somebody who understands, like you lost your daughter, you'd try to cheer up that person and say, "You're going to be OK…You still have your husband, you still have your other daughter." I try to tell them we still got ourselves, and still got your daughter, and still got your family members, brothers and sisters…or their aunts and uncles…So I try to say that "You're not alone" ….that this person is not alone. I've told people who've been suicidal in the past…like, I dreamt of suicide….ahead of time…and I dreamt these people… they wanted to go home…and I said I wouldn't want to be in that situation. So it helps….Like, a lot of Inuit elders, they are taught from dreams. They really believe in their dreams. I didn't believe it until I went in there.

M: What kinds of things happen with dreams? I know that some of the elders in the interviews talked about how their parents would ask about dreams, so that they might get an idea if there was going to be trouble coming and so on. What kinds of ways can dreams be helpful? What have the elders told you, or what's been your experience?

B: When I spoke to my husband's late grandma, she would say, "That's a warning for you." Like, this person…maybe went hunting, and he didn't come back. And she told me that somebody's probably out there right now…and may not come back. And that really scared me, so I never mentioned about my dreams again. But then I came up with another dream, and I asked her…Anyway, that person didn't come back. The one I dreamt…it was a different person, not that person. So it makes a lot of sense.

M: But it could be a warning of something happening….

B: Yeah. Or, my sister had a baby girl when she was pregnant, and I was thinking….cause she has 4 boys…and she did have a baby girl. And I didn't tell her because I wanted to surprise her…but then I would have told her I would have been wrong if it was a boy…But it was very …good…cheerful. She had a baby girl. It was like a different world…..Some dreams….I dream about when somebody's going to die, but it's not always the certain person…somebody else. Like I'll tell my husband….And I know this other lady, at the ladies' group…I told her I dream of people, when somebody's going to die, and then a couple of days, a couple of days later on, someone has died. And she said, "I have the same, similar, dreams." So we try to talk on the phone, and say "This is what I'm dreaming." And she'll be dreaming similar.

M: So you talk mainly to her….You mentioned like not mentioning to your sister about the dream…Is it something that you don't talk about publicly…that you talk about with this woman?

B: Yeah. When my sister was pregnant, I dreamt that she had a baby girl, and she did have a baby girl. And I didn't tell her until she had her baby.

M: Because, as you said, it could have been a boy…(B: Mmhm) Same thing with the death dreams…like you say you don't always know who it's going to be….(B: Mmhm, yeah…) Have elders ever used…when elders have been trying to help you…have they ever kind of suggested that you get help from your dreams? I know that they use them as warnings, but have they ever suggested that you look at your dreams as a way of figuring out an answer?

B: Like when we had our first son, I used to dream of this old lady. And I told this elder, "I've been dreaming of this old lady." And I told her…I know her…when I was a little girl, she was my mother's friend…so I finally called her. "I keep dreaming about this elder," so she said "You have to name your baby after her." And I said "But he's a boy." That really hit me. And she said, "It doesn't matter. We can name our babies, even if it's a boy or girl…if it's a girl, we can use a girl's name, and for a second name…we can call him Peter or Mary." And so I started to figure out how we're named after. So it made sense. So I stopped dreaming of this elder when I named him after….my son. I thought it was going to continue forever, but it didn't.

M: Once you did…once you named him…..

B: I had the same dream…different dream…with my youngest one. I kept dreaming of this old man, when we were kids. He said…I mean, I dreamt about him about 5 times. And I finally told this lady I used to see, I was dreaming about this old man who died maybe 5 years ago…and she said, "Did you name your baby after him?" And I said no, it's been 5 years since he's been gone. And she said it doesn't matter when they're gone…if they want to be named after, want to be looked after. It makes sense. I never thought about it…that they take care of you and you have to take care of them. It's really interesting…. But when it's scary dreams, I usually tell my partner I had a scary dream, and I don't want to think about it. And I don't want to think about it …but if I'm nervous, I'll talk to someone about it. Like a warning. But I try not to concentrate on my dreams too much…like they can take a lot of energy, a lot of time…So I …As you get older, you learn more…understand more. My husband could never remember his dreams, and mine's pretty clear.

M: Yeah…Some people don't…..

B: I always ask him, "Was your dream colour?" and he says, "Nope." He says he doesn't remember but then he can answer "no"! [Laughs] Cause when I was taking the social work course, we were trying to find out if they were colour or not. So that's when I really started to concentrate….

M: And some people apparently don't dream in colour……[pause]

B: …..But it helps when you try to help other people…just assist them so they're not alone. That things will be OK. You have to believe yourself there's a positive good side, in life. Cause I notice when I was unhappy, life was just black and white. Could be colour when you're happy, or it could be opposite. It's a matter of the person's belief…what they will ….It varies, I guess.

M: But for you personally, that belief in that…things can be OK, and you can make things OK….

B: Yeah…But I have good too….My late son and my other son…they're OK. They're old enough to take care of themselves. My own situation, I was a little girl one time and I had to discuss how I grew up…and there were things I had to do, and things I wasn't supposed to do. And there were

things my mum or dad would try to tell me not to do. but I would just go ahead. And that`s how we learn. Sometimes it can take a very long time for the person to understand. …Like this person who drinks…it`s up to the person. Like before when I drank, I would just say, "He wanted me to drink," so I drank. But when somebody asked me first, "Did you want a drink?" No…but I would be scared to answer no. Because I thought somebody would take that as negative. But it was the truth. Believing in the truth was hard for me to do. So until you get there, you can encourage…….

M: So you're saying that you would kind of say that it was…they were the ones who made you drink, rather than you…..

B: Mmm. Yeah…..

M: That whole idea of, "It wasn't my fault…..

B: Mmmm, Yeah (laughing) ….Because one of my family members helped me every day to make sure I am OK. Saying "B, how are you?" and I'd say not too bad. And he'll know from my tone of voice how I am. "You need more sleep." You know? And I'd say, "I'm sick, I'm resting, I'll talk to you later." He understands…We understand our friends and what it is we're concerned…..We can feel from them. Not just our brothers and sisters.

M: But people you're close to….

B: And it helps when we name these little babies after our relatives. I think that's why it's very strong here. If you`re named after your grandma, I`m sure your brother or sister will want to know how you are, once in a while. And your little niece or nephew. So it helps to have other people to understand….

M: It's almost like you've got 2 relationships that…you've got…if you name a child after, say, a grandparent, then it`s kind of like they're your child but they're your grandparent as well, and it's a double, a double closeness.

B: Yeah. When we lost our next door neighbour, it's like my heart was falling down, cause I was grieving maybe too much and not talking about it. And then we lost our other neighbour, and it seemed like we had the same twice, cause it was getting too heavy, and we weren't doing anything. Until we started to talk about it. So that`s how a person starts….it helps to talk to someone.

M: Yeah…What I've gotten throughout the time we've been talking. is that for you at least, the really important thing is to talk about things rather than hold them in… until they get so heavy…but to get it out and deal with it, whether it's the past, or whether it's feelings, or….Talk about everything…..and talk to somebody who understands what you're going through…and who you can feel understands what you're going through.

B: Yeah….I got into trouble at school…and I said it's going to go away by itself. When you're in high school, it doesn't go away by itself. Like when I was a little kid in kindergarten, or grade 3. I would get into a lot of fights…and I would go home and grieve, and my mother would say, "You asked for it, you got it." And I used to wonder "Why did she say that?" Finally, when I went into grade 8, I didn't want to get into fights anymore…..

M: Somehow, I can't imagine you getting into fights…..

B: I was only there to protect my eyes, my glasses. {Laughs] And now I don't [word unclear] …Anyways, so that's what I try to tell them. Like this person who didn't look happy…I used to tell them "You're going to be OK. It's one day at a time." I told them …I saw this note somewhere, "Don't panic. You're still here." So that clicks in my head. When I'm nervous about something, or scared to see a doctor, or a lay reader or someone….that will click, "Don't panic, you're still here." So it really helps. If you think positive, positive things can come out.

M: Again, you seem to do a lot of that self-talk…paying attention to what you're thinking, and trying to change it into positive kinds of …..(B: Mmm)…beliefs about yourself and the situation……

B: Sometimes, when I'm going to work, I say, "I wonder what's going to happen today." And if I go too far…that's when I say, "Uh-uh, I lost my concentration." So we always have to walk back and slow down…take it easy. That's what I tell [husband] anyway. So far, I've told him to even write a song…for those people. Maybe it would help, to write a song today…..how they feel…And that's why the teenagers today are into music. For that workshop I went to…today they're into music, cause music is the one…that's talking to them…So, I was telling this elder, my late mum's friend, I was telling her why their teenager is into so much music. Because they're the ones who are listening…to MuchMusic. It made sense to her when I told her. That's why our kids don't want to talk to us. And a lot of English is spoken ….and Inuktitut…. Even at home, when I tell my friend,

"I'm going to go home today and I'm going to talk Inuktitut all the way." And right away I say, "No, I wasn't going to …" or I say, "Somebody get the phone…"…like, everything is in English so fast…

M: Almost automatically…say it in English…

B: Yeah. Even when I'm doing an interview in Inuktitut, I'll always say, "You know…you know…" It's just so automatic. It's amazing. Even when I'm listening on the radio, I'll try to make sure it's all in Inuktitut, like for those programs that are from 6 till 9. All in English, all in Inuktitut, all in English, all in Inuktitut. It helps by listening….what you need to say.

M: I've noticed that here, just listening to people talking, and it'll be half a sentence in Inuktitut, and then 2 more words in English, and then in Inuktitut…

B: Automatic. When my niece and nephews were visiting on the weekend, that's all we spoke, in English. That's all they understood. If we spoke Inuktitut all the way, they would say "Huh? Huh? Huh?" It really helps when you're with the kids. They're the ones who will tell you if you're making sense or not making sense….cause they're really smart. Even my little one has to remind me, "You were going to talk Inuktitut, mum." So it's really helpful.

M: That's great that she's aware, and that she's interested….

B: Yeah. I think that's why they say Inuktitut is very strong…that we have to get it back. I think it's us who have to work on it ourselves, not just blame other people. That's why I notice, it's so fast in English. Even if we want to say something on the phone… English. Automatic. But they're working on it, and I wouldn't want them to blame other people…someone else.

M: It's like, you have to do it. If you want it to be in your home, you have to do it. If you want it carried on, it has to come from home and from you…..[M comments on own experience as a child in a non-English home.]…

B: I only notice I speak Inuktitut if I'm reading the Bible…or singing a hymn. Or, a band is playing in Inuktitut. Those are the only times in Inuktitut, all the way…….

M: [pause].....Anyway, anything else you want to say about helping that's important, or things you think a counsellor shouldn't do, or….

B: I think the counsellor who wanted to help other people should help herself first. Like, if you're going to become a counsellor in the future, you have to be ready…willing to help other people….anytime of the hour. And you have to give yourself to that person. Like, most of your life you'll be wanting to help, and it's going to be very encouraging. And sometimes it's going to be very strong that you don't want to do that. That's what I learned. That if I want to help other people, I have to help myself first. That's what I want to encourage people. This person used to say, if you want to be a teacher, you have to be willing to teach. If you want to be an RCMP, you're going to have to do what the RCMP does. It makes sense. If you want to be a counsellor, you have to be willing to help, willing to understand, willing to listen. That's the way I see it.

FOLLOW-UP: Nov. 30/00

M: ….When we were talking the other day, you mentioned a couple of things that when I typed up the transcript, I noticed….and I should have asked you more questions in a couple of areas, and I didn't, so I wanted to…. Right at the beginning I asked you about, did it matter to you if you went to an Inuit or a *qallunaaq* …did it matter who helped. And you mentioned that if you needed to talk about your mum, for example, you would go to an elder, or rather to an Inuk. But if you needed to talk about or get some help about your kids, then you might go to a *qallunaaq* instead. And I should have followed through on is, why that distinction? Why do you….I can understand probably about your mum, because the elders knew her and knew the kind of life she led. Is that why you would go to an Inuk if you're talking about mum?

B: Yeah. Cause they seem to understand more because they're elders. And when I couldn't say something in English…or in Inuktitut…they would know what I was trying to say. It depends on how they understand.

M: What about the idea of maybe going to a *qallunaaq* if you needed to get some help about what was happening with your kids?

B: I think I'd go to a *qallunaaq* because they understand more English…and they don't live the way my mother or the elders used to live. Cause when I go to an elder about my kids, they say they're supposed to be living like that (gesturing behind her). They're still looking at their own experience

when they were kids, so it makes a difference sometimes……. It doesn't make any difference….they should understand more.

M: So what I understand you to say is that kids aren't living the same life. They're living life now and not in the past (B: Mmmm)…so *qallunaat* [plural form] might understand more about what's happening with your kids.

B: Yeah. Uhhm.

M: OK, that's one thing I wanted to follow through on. The other issue….you mentioned that the woman you really depend on….you have one woman that you really feel comfortable talking to because she's really nice. And you mentioned that she never lectures. What do you mean by 'lectures'? …..To me that's an important question that I should have followed through on.

B: Yeah, I thought about it too, afterwards….[phone rings, interview pause]

M: Anyway….so I wanted to ask you about that 'lecture' thing, to make sure that I understand what you mean and why you thought it was….why you mentioned that.

B: Yeah, I thought about that, even this morning. Why did I mention lecture? And I said I should watch more …what she says and what I hear. But I seem to understand a lot and she knows me pretty well. And when she….She does lecture me…Like she'll tell me. "You should try to do it this way….You can try. But if it doesn't work, you're going to find out yourself." That's what she'll say. And I told her…. like having a baby, it could be a long time or it could be a little while. And she'll tell me, it could be a big problem or a small problem. And I didn't realize…She just makes sure that she tells me what is good and what is wrong…what's not working. So….

M: So in terms of lecture…'Lecture' to me has a slightly different meaning. A lecture, to me, is somebody who's kind of saying you're doing things wrong, or you shouldn't do this, shaking their finger…(B: Yeah, mhm) But again, what I hear from you is that she'll explain things, she'll tell you what she thinks might be the right thing to do… (B: Yep.)….Does she do it in a way….well…what you just said gives me the understanding that she will give you suggestions of what you could try. But does she insist you try

them? I just got the impression (B: No.)….that she says "Here, you could try it, and see what happens."

B: Mmhm. She usually explains how she did it. Like if sometimes I try to say it the way she did it, and I can't do it, then I realize that it doesn't work out that way to me, like it works out to her…or to other people.

M: So different things…people need to do things in different ways?

B: Mmmm. Different ways. It's kind of different…..

M: So something that fits with you?

B: Mmm. Yeah! Like …she has 8 kids, and I have just 4. And she told me that you can have so many kids as you want, but it's up to you. And she'll explain "I have so many kids…" She'll say, "If you have 8 kids, B, you would understand how it is to have 8 kids and not 4." And that's what she'll say to me…When I thought about her that day we did the interview, I was trying to find out how did I get to know her. She was a close friend of my late mum. That's why I think I'm very close to her. And she understood my parents.

M: So she kind of knows you and knows your background…..

B: Yeah. She's really helpful. Like I told her, "When these people need help, I don't know what to do." And she tells me "You can give them suggestions, but don't tell them to do it." Then she'll say, "I can tell you this, but it's up to you to try it." For example, for a couple, if the other person doesn't want to talk, don't force that person to talk. I thought that was good…good for them. But I realized myself, it's not good when I don't want to talk to someone and somebody's telling me to say something, and I don't know what to say. So I was thinking, "Later on."

M: So that…pay attention to how the person is …and do what it seems that they want to do (B: Mmm) … rather than pushing that "You have to tell me right now." (B: Yes!) So give you a chance to do it in a way that's right for you?

B: Yeah,

M: Anything else that you've thought of…want to mention? This was really helpful. It was exactly what I wanted… needed you to explain….because there's so many interpretations of 'lecture'….

B: Yeah…I was thinking about …why I miss talking to elders or young people or *qallunaat* or friends…It depends on how we feel. I really realize that talking to ANYBODY is good, as long as you don't hurt them or they don't hurt you. This I learned from talking to some people…they're going to scare me. Like scaring me away. But if somebody's willing to listen, I'm willing to talk. I guess that's how communication happens…I'm finally realizing after so many years….after having 4 kids, husband, house…like, how come I didn't know that 20 years ago? [Laughing] I was thinking, too….if this person never had kids, if he would understand how it is to have a kid. Like I always remember when I had my first baby….like, a person who has their first baby…first time….It's a good feeling…you can't even explain. So if somebody's unhappy about their kid, their son, and if they're not really talking, and they don't know what to say, I try to let them remember, "Remember the first time you had her, the first day, when she was born or he was born? What a great feeling…?" And that feeling can come back. You have to get rid of those frustrations, those thoughts. That's what I try to get them to remember. Even if they don't have their kid or baby, with them. It seems to help.

M: That's interesting, because I use that same kind of idea with, say, couples who are fighting…and kind of say, "Remember when you first met? Try to remember that time you loved each other, you liked each other…try to remember what that felt like…what you liked about…" and ….people sometimes need to start from there…

B: Yeah. Mmmm… Look back and say, "remember that time…" It's the communication that's blocked…Like yesterday, [husband] and I were married 17 years, and I was trying to remember…we had just 2 kids that time. And it was a good feeling…I felt very….in looking back. And I said it could be like this every day, but it's up to us if we want to be happy. We've learned to say no to some things…that weren't right…things that didn't work out. And things can work out but you have to keep trying. Cause in Inuktitut…elders used to say "You're going to be OK in the long run…if you're working on it." And I never used to understand what they were saying. So finally, I can hear them…that it's working out. It just takes time. I'm a very impatient person. …So it's starting to make sense. And when things start to make sense, you can find more happiness. So that seems to be the answer. …I never used to believe that a person can be mad

or sad all his life…or happy….all the time. Cause there's both of them. this or that [gesturing 'up' and 'down'] ….and trying to get over that mountain. It takes time to understand. I guess we're learning…today….

M: Yeah, that's the thing…as we learn more and we understand more. And hopefully we get wiser….

B: Yeah…Mmmm! Some kids think that maybe hockey players will always be hockey players, and basketball players….They have to work through it. Trying to get those people to understand that if you want to do something well, you're going to have to work on it …later on….

M: That you have to kind of keep on…trying …trying in order to make it better….?

B: Mmm. Like crocheting, or sewing…Like making the first mitten, the first time…you'll know what to do better the next time. …You learn by keeping going….It's good to learn. And it's good to get feedback, and it's more encouraging when we encourage other people. …going through a big mess, but it's still a good life…

M: And you can get through the bad things….

B: Like a baby being born…..

M: You've got to push through…

B: Yeah. You've got to think positive. And you've got to encourage people. Like I find that happening….Cause I really believe everybody has happiness inside us…..even if they don't feel or believe that, they'll find it in the long run……..

[conversation moves onto a personal track…]

Informant D

M: What I would like is your own ideas. I know you've had training, and you've had lots of situations in your own life as well. But I`m interested in what you personally feel is good counselling, whether in your practice or whether you were asking for help yourself. So that`s the kind of stuff I`m going to ask you about. And I have some questions, but every interview I've done is different, because we go off on different kinds of tracks. …..Alright. First thing I want to ask you is, have you got any general ideas about what is a good counsellor? What makes for good counselling?

D: Someone who's not judgmental, someone who's not giving advice, someone who is listening and there for them.

M: Yeah…there for the client…..Right at the beginning too, I'd like to ask you whether it matter to you whether you got help from an Inuk or from a *qallunaaq*. [Phone rings, tape stopped.] Yeah. So does it matter…does it matter if the helper…In other words, is it necessary that your helper be the same ethnic background or the same cultural background?

D: For me, it really depends on the helpee, the help they prefer in a person. If they're an Inuk, that's fine. Whichever language…I find it depends it depends on the helpee rather than on the helper. It is important if you have the same language so you can understand where they're coming from, what they're saying. But for me, it's OK whichever way it goes.

M: What kinds of things…People are often nervous when they come in for counselling. What kinds of things do you think a counsellor should do to help people be more comfortable?

D: Be more at ease and being very warm.

M: Relaxed yourself, and warm towards the other person.

D: Yes.

M: Some people have told me that it's really important for them that they be understood, that their situation and themselves as a person be understood. How important would that be for you?

D: It would be very important for me, because if I'm not understood, it can be harmful if you don't understand. If the helper don't understand what the person is saying, it can do more harm than good. So understanding is very important.

M: Can you give me an example of what you mean by being harmful?

D: If a person is asking for help about, let's say sexual abuse, and if the helper doesn't understand about what they're talking about or what they went through or what they want, then the helper might go to the wrong direction and the helpee would not receive what they were coming for.

M: Yeah…So they would be looking for something and they wouldn't get it because the helper got off on the wrong track. (D: Yes.)…You mentioned about understanding what they've been through and so on, and that takes me to another question. Do you think that it's necessary that the helper has to have gone through the same kinds of experiences?

D: Not necessarily. But yet have understanding and…no, just have a basic understanding. For example, with, say…I've never been alcoholic, but I understand it because I've seen it and I've lived with one before. So just having to understand it makes me be able to help someone else who has a problem with alcohol.

M: So you don't have to have …been that, been there yourself. But that you have knowledge of what's involved and how those situations affect people and so on. (D: Mmhm.)….You mentioned about a counsellor should not be judgmental. What do you mean by 'judgmental'?

D: Judgmental meaning…OK, let's see…If you had told me certain information and I jumped in "You shouldn't be doing that. That's not right. That's wrong .." If I were to say "That's wrong to do," then I would say that's judgmental. Or if you are give your opinion "That's not right" or "That's not the way to do it," talking about someone's behaviour. And you give your opinion about that's bad or that's good.. That's judgmental.

M: OK. Why do you think that that's a bad thing for a counsellor to do?

D: Because judgmental…the trust…you start to lose your trust. Because when you're judgmental…I don't like to be judged. And a lot of people don't like to be judged. And if I'm going to be judged by someone, I wouldn't want to go to that person.

M: So trust comes partly out of feeling, then, that the other person isn't thinking of "You're a good person" or "You're a bad person", but the helper is simply there…

D: ….to help…

M: …to help….

D: With what you need.

M: OK. Talk about feelings. Some people are really uncomfortable talking about feelings. Other people feel it's really important to be able to express their feelings. How do you feel about that? Which do you think is helpful?

D: Hmmm (laughs). Hmmm. I think….it depends on the person who is asking for help. It depends on the person. If feelings are very important to them, let them be…For me, it goes both ways. I'm usually more on the client's side. If they want to talk about their feelings, that's fine. But if they're too stuck on it, I try to move them on…or deal with it. Not deal with it, but to help the client to deal with the feeling that they're having at that moment. Because all components are important, their feelings, their physiology, the thoughts, the way you move, your actions. They're all important.

M: They're all tied in together…(D: Yeah.) How about if a person doesn't want to talk about their feelings? How should a counsellor cope with that?

D: Well, they do usually talk about their feelings somewhere along the line, so I would say to be patient.

M: So are you saying to let it come from the client in that case then…?

D: Yes. You can't force someone to do something they don't want to.

M: OK. You also mentioned that a counsellor should not give advice. And there are again different kinds of ideas about that. Some people may feel that they want to be told what to do. Other people may feel that they want to make their own choices….There are also different ways of giving advice. I know that sometimes it's like "Oh, you should do this…" and sometimes it's like "Well, here's some possibilities…" So…tell me…how do you feel about that?

D: Well, with advice....What I usually do is search different ways of doing different things, and then it's up to the individual which way they want to go. I give the individual to search which way...how they can go about solving problems. There's no one way. There's no one right way. And I search with them..."This is one way. This is another..." And that's what we do. And she's then ....If I am to say "If you do it this way, will be better," anything goes wrong, I'm at fault. So I don't want to...

M: Yeah. So what I hear you saying is that you're...Give some choices, give some ideas, give some possibilities, but then the client should make the choice as to...

D: ...what they feel.

M: OK. You also mentioned that no one way is the right way...takes me to another question. Do you think that there's one way of counselling that's good for everybody, or....?

D: With clients...It depends on the clients. I will do one way with one individual, another with another individual. It makes a difference with their personality. So there's no, no...

M: Yeah. So what you do again comes from the clients rather than you putting something on them.

D: Yeah. Yes.

M: It sounds like it's important for you to have different ideas and different ways of dealing with clients...?

D: It's extremely important for me how...well, different ways of counselling. Cause if I don't know, I'll feel like I'm stuck on being able to help the client. So I need to be able to know how I'm going to help the client's needs.

M: So...as you say, different ways for different people?

D: Yes.

M: OK.....Have you ever had an experience in asking for help...and not necessarily with a counsellor, but asking for help generally...where the

person who was trying to help you actually kind of made you feel…or you felt…uncomfortable. Can you think of a situation like that?

D: No….

M: OK. The reason I asked that is that I was then going to ask you what did the person do…that created discomfort in you or that you couldn't relate to… OK…What else did I…How….

D: When I get stuck with clients, I'll ask for advice from my coworkers. And it's usually very helpful. And if I don't get answers what I'm comfortable with, I'll go to my supervisor. My supervisor goes through strategies with me and I'm like "OK!" Because what's comfortable for me then it's more helpful.

M: When you feel more comfortable yourself in terms of ideas and strategies available…then you feel that you can help the client better? Is that what you're saying?

D: Yeah.

M: OK. (laughs) I say "OK" a lot, I'm realizing that. I just had another question that ran through my mind…I know what I wanted to ask you…. Is self-disclosure….sharing about yourself with a client, or having a counsellor share information about themselves if you were a client…How do you feel about that?

D: I do a little bit of that but not in detail. Just to say "I'm human being too, and everybody goes through that…" …Well, not everybody goes through it, but we all have feelings and we all have thoughts. So just a little bit but not in detail. I think it's very helpful. Even when I…When I was going through counselling for a while, I thought "Geez, I don't want to talk to a perfect person." That's what my mind thought. Because I wanted to know how do they deal with problems when they get into it. That was helpful for me when they gave me a little bit of disclosure, but not in detail? So I do the same, because that's how I want it.

M: Yeah. So you get to know that the other person …has also had problems and maybe has been able to deal with them….?

D: Yeah. It's nice to know you're not alone. So just a little bit of disclosure, but different for some situations, for the person. I usually try and know how

much info they need, or what kind of situations they need. Like I'm giving examples…I have to use myself sometimes…

M: Yeah…if you can't give examples, kind of, from other situations…..

D: So I have to use myself sometimes. And it's "OK, do I want to disclose or not?" So I sometimes have to debate on that. But as long as the person understands that they're not alone and there's other ways of dealing with it, and to know that…having to know that someone went through it is very helpful. And to see how far they've gone. A little bit of disclosure, but not in details.

M: Why not in detail?

D: Well…cause it can…if I am to go too… I'm like the one who becomes the client. And if it's broader, and they understand it, then that's fine.

M: Uhhuh. So you're saying that if you give too much, it's kind of like the focus becomes on you….?

D: Yes.

M: …rather than on what the client needs, the client's problems.

D: Yes. That's how I see it.

M: Yeah….Change…Every time somebody comes for help it's because they want to change some kind of situation, whether it's inside themselves, or in a relationship, or something. Where does change come from? How…What's your role as a counsellor in change?

D: In change, what I do, cause they're wanting to change, I try to help them on what they want instead. What do they want? If they are to change, what do they want? And I get them to focus on what do they want, not on what they don't want. Cause if we go through what they don't want, what do we replace it with? Cause if we look at what they want, then we can start working on that goal. Cause change is scary too. So I tell them its scary, sometimes they'll go back because that feels normal. So when we went through changes, we…what I do with them is what do they want and how they'll go through it. So we look for strategies to them.

M: To help them reach whatever they decide. Again, I'm getting the understanding that it's the client…in your point of view. it should be the client who decides what it is that they want….

D: Yes. The client. I'm very client oriented.

M: So the change comes from the client…And you said "We go through…" Are you saying that you and the client kind of work together…?

D: I work with the client. Yes. We work together, but it's the client's decision of what they want to do. We go through it together, how about to go, and we do a lot of strategies…how about to do it, and which way to go. And when they're doing searching out what they really want, I leave it up to them. If it's too hard for now, you can come back to it, think about it. And sometimes it takes time to really know what you want. And if you are telling me what you don't want, it's like "Hm. But what do I want?" It becomes blank? So I try to focus on what do you want rather than on what you don't want.

M: So focusing on the positive rather than the negative kinds of things. And giving people time to work through….(D: Yes.)…You mentioned…going back to the question and discussion about feelings, you mentioned something about getting stuck in feelings. Can you tell me more about that? What do you mean by "stuck in feelings"?

D: Sometimes if you've been hurt really bad, or if they're scarred, they feel like they're stuck. And they're scared to move on because they don't know what's going to happen. That's what I mean by "stuck". And when they're not ready, they don't want to let go. Because if they let go, then it becomes empty. And they might get hurt even more. So…

M: That's an interesting kind of concept…that if they let those feelings go. maybe there's nothing …….

D: Yeah. If you let go…now what? And… the fear is always there, if I have no more feelings, then do I lose in touch with the reality. So….I usually say I'll go back to it after when you're ready. Takes time though. And I say we can do a little bit at a time. We can't just take it out all at once. It's like being stripped. If we try to heal the person at that point. So I say take a little bit at a time. Very time-consuming too. Takes lots of time. And energy. That's what I explain to them too. Not to give up.

M: Yeah…I wanted to back too to the client's being understood. How can a counsellor kind of make sure that they understand. Again, in your experience, if you had counselling, how did you know that the counsellor understood? Or how do your clients know that you understand?

D: What I usually do is paraphrase it, in a different way with different words. If this is what I'm understanding. Just to check with them if I'm right, the understanding that I have. That's what I usually do. And they say "Yep, you've got it right" or "No, that's not what I'm saying." So I check with them if what I'm hearing is…how I'm understanding it….

M: So if your understanding is correct, so they can correct you if you're not….I also wanted to ask you…You have a BSW from a university down south, and that was…it was an aboriginally-oriented BSW program (D: Yes). And I know you've taken Reality Therapy training, and I know you read a lot about various kinds of thing. I'm really interested in the whole idea that these…things like Reality Therapy, for example, are Western, kind of, *qallunaat*, ideas of counselling. (D: Mmhm.) And there's much often said about that kind of stuff not being appropriate for aboriginal, working with aboriginal peoples. (D: Mhm.) So I'm interested in what your view is in terms of…as an Inuk and working with Inuit clients…

D: I find it's very helpful because what I've noticed is it's here and now, and with the whole body, and they're looking at the whole situation. So you can easily integrate it there. Even with my mother, she…I've noticed she used it on me a couple of times. (laughs). Like I recognized the style right away, so even though it wasn't …theory or …it wasn't written or…They just lived it. So I can easily integrate it.

M: So what you're saying is that even your mum, out of her own tradition and her own past, uses similar kinds of things that you can relate to, and you can see the connections and …

D: Yeah. Cause they're looking at right here today, and the whole situation. And "What do you want? How do you want to deal with it? What do you want in your life?" It was VERY similar. After I did all this training and I felt …because it's…I felt like I needed to talk to her, and I needed her to hear me out. And she was really using the choices, the reality…I kept looking at her…!

M: You had just learned it and here was your mum…..

D: Yeah, she's using it already. [We laugh] So it was like OK, she never went through the training, nothing like that…

M: It was just her natural way…..

D: Yes. So…you can easily integrate it. I think it's very helpful. I was surprised. I was very surprised! (laughs)

M: Yeah, because you've done training….

D: …and she's like already using that. And I'm like, "Oh my God!"

M: That's interesting….to start seeing that there's connections here…

D: Yeah. It's not new….For me it was new, because it's …the training was all new to me. But with my parents, it's not new.

M: That's the way they've always been….

D: Yes. I didn't realize that until I went through training.

M: Once things come to our attention then you notice that "Oh yeah…"…Anything else that you want to tell me about what you think is effective counselling? What you're trying to do when you work with your clients…?

D: To be sincere. To be yourself. That's important to me. For me, if I am myself and to be sincere to the individual, they find it very helpful that way. Because they can easily pick up that you're pretending or you're not there for them. They can easily pick that up. So to be really there for them and be sincere. To be yourself.

M: OK…And I know what you mean but I'm going to ask you to explain it anyway. What do you mean when you say about being sincere and to be yourself?

D: To be yourself…to be able…When you're yourself, you're not someone else. If you behave the way you usually do in your everyday life. And…because they see you, they hear about you. That's why I say to be yourself.

M: Yeah. So your own kinds of reactions and your own personality kind of comes…should come through…

D: Yes. And when you're talking with them and you're there with them, and that's what I mean by sincere. To be REALLY there when they need it the most.

M: Yeah…How about confidentiality?

D: I think it's VERY important. I tell my clients that it's very important. Even for them …who they see here, you don't talk about them, you don't tell anybody who you see here. And the same thing is important for themselves too. I tell them that it's just between you and me. And after that, it's…And I tell them that if I get stuck, I can talk to my co-workers just so they can help me out. But we, I don't say any names. And I ask their permission if I can do that. That if I get stuck, and they say yes, it's OK….And with confidentiality, I find it's very important for the client as well. Because some are like, "I don't want anybody to know that I come here." So it's important that they also…that who they see stays here, or what they hear. So it's protecting the other person too. It's not just themselves. I usually stress that right from the beginning.

M: I gather that you're not uncomfortable telling a client if you do get stuck.

D: I'm not…I tell them if I'm very stuck that I'll need some time, or I'm going to need to talk with my co-workers because I've never been in that situation before…I explain to them if I'm stuck or if I've never been in that situation before, and I tell them "Is it OK if I ask around?" and they say "Sure." I'm very comfortable telling them if I'm wrong, or if I get stuck, or if I don't know about it.

M: If a counsellor were to tell you that, how would you feel if they said that to you…like "I'm not quite sure what to do right now"….?

D: I would feel comfortable. Because it's honesty there. If I am hearing that, I'm like, "Wow! I'm not the only one who doesn't know…" Because we don't have all the answers. That's what I stress too. I don't have all the answers but I'll do my best…

M: Yeah…To me, actually, that's part of what you were saying of being sincere and being yourself and being able to …being able to acknowledge

that I don't have all the answers, but, you know, we can try to find out. …Personally, I like that….Anything else?

D: Not that I can think of….

M: Yeah, you kind of covered most of the things that I wanted to ask you about……By the way, what do you mean by being warm? You mentioned that early in the interview.

D: Well, being warm…make them…what I mean by that is…explain to them my role, and trying to let them feel comfortable….Are you OK? Is this comfortable for you/? Is this too small a room? Are you comfortable? And just…for them to be themselves. Tell them to be themselves. And let them know my role and how I do my counselling. And if they're uncomfortable with me, they can always change counsellors. Because we all have different styles. Just let them get to know me a little bit. Just for them to understand me. And just to try to make them feel welcome.

M: Yeah…make a little connection there…

D: Yes, that's what I …. being warm, and to get to know them a little more.

M: So you do explain your role too…

D: Yes, I do that.

M: …and how you work…?

D: Mhm. I explain to them …just so they don't have too high expectations. And the model I use, and the confidentiality, and the co-workers. And….explain to them. And I always tell them, if I'm going too fast and you don't understand, ask me. And if I'm asking too many questions, let me know…

M: Again, kind of paying attention to the client and trying to let the client know that you're there for them and their needs…

D: Yes. And I usually let them know that it's their choice of how they…that they have choices. There's always choices no matter where we are at. But we just have to find them, that's the thing. It's usually pretty OK, the first meetings. Usually…

M: For yourself, are those all strategies that you would find comfortable for yourself if too if you were a client?

D: Yes. If I am to know what I should expect or the role of the person…and if they have told me "If you don't understand"…I wouldn't mind being told that if I don't understand, just ask. I'm like… I didn't have that, so when they say that, it's like "OK." And…because with me, I look how much I'd trust myself in their shoes sometimes, and if I was in that situation, what would I want. So that's important for me too.

M: In your experience, what's been kind of the most helpful kinds of strategies that a counsellor can use?

D: When the client is very….when the client is into it, wanting to change, wanting to look for different ways, that's when it's very helpful. When they're ready for change.

M: That's an exciting kind of thing…

D: Yes. Like "Alright!" And if they show progress, it's like, "Wow, that's really good!" So that's the area I like the most. And when we're looking for strategies….when it's not just me looking for strategies but when they get into it themselves. I learn from them too. When they're talking, "OK, if I do this and this is how it's going to go…If I do this…" When they're looking at it. I learn from them too.

M: When they're thinking about and evaluating their own kinds of ideas and trying their own kinds of ideas….

D: Yes, that's when I feel like" Alright! Hurray!"

M: Yes, "They're on track…" (D: Yes.) Good. OK, you've given me a lot of information and as I said you've kind of covered all the main things I was interested in. And what I'm going to be doing is comparing what you say, to what does Western counselling say, to what do the elders say. So it's going to be all kind of comparison. And all I can say again is ….anything else? [laugh].

D: No, but I'll probably remember when you're gone.

M: And I'll probably think of other things when I'm gone too. That's such a bad question, eh. "What do you think, generally, about the world?" If I do

think of anything else…what happens when I type up the transcript, things may occur to me…"Oh, I didn't follow through on this" or….so I may be back to you. And I'll give you a copy of the transcript and my summary analysis. Then you can tell me if I'm wrong about what I think I heard. I want this to be your view. I don't want to put my stuff in….

D: OK……[We go to personal chat]

Informant E

(DONE BY E-MAIL)

M: First of all, I'm wondering if it would make any difference to you whether a counsellor is Inuk or *qallunaaq*? (Whatever your answer is ...or if you think an Inuk would be better for certain situations, a *qallunaaq* for others ....can you explain why?)

Secondly, asking for help can be very difficult ...it can sometimes make people feel nervous and uncomfortable. What has been your experience?

E: The first question: It does not really matter who you are talking with to me because it is up to the individual to have that kind of a feeling towards race. Some people go to an Inuk for counseling to talk because some people think that some *qallunaaq* does not have the same experience as an Inuk does. I don't mean the skill and ability that the *qallunaaq* or and Inuk have, what I mean is that they want to go who has similar experience that the person has. Some people in their mind say's that "the only people who would understand where I am are the people who go through the same situation I have". Some people would think about the language that they think they can't speak or think that they won't be able to make any sense.

M: Does it matter to you PERSONALLY if a counsellor is Inuk or *qallunaaq*, if you needed some help?

E: No it does not matter who I talk with as long as they do understand my situation.

Asking for help: Sometimes it is difficult to ask for help, there are number of thing that comes to your mind. Would I'll be just being laughed at? Would that person understand me? Even when they understand me would they be able to help me? Like when your feeling low there's no one to turn to, even that you have lots of friends, you know that you can ask for help from the counselor but they won't understand where you are and what's your situation is. Even though that they will understand me but I say that they won't be able to help me. The most difficult to ask is when I'm in the situation where there's no way out.

M: From what you said in your last e-mail, it seems that you believe it is important that the counsellor understands you and your situation. How would you know if the counsellor understood? What can the counsellor do or say to let you know that they understand?

E: A simple reply would tell or a simple question.

M: You talked about how it can be really difficult to ask for help, especially when you feel "there's no way out." If you feel in a situation that "there's no way out", should a counsellor make you feel more hopeful? How could they do that ...what would make you feel more hopeful?

E: A man told me about the life, he said as long as you live there is a hope to change. Also you can give an example, tell the story in your own experience. How did you manage to go through the hardship.

M: What kinds of things should a counsellor do that would make you feel less nervous, more comfortable? In your own experience, what would make you feel more comfortable?

E: Their own experience. Like I wouldn't want to talk to a person who won't understand where I am. Don't say "talk to God" he's been there. Say you have been there.

M: Another question: Some counsellors give advice, tell you what to do. Others just make suggestions, but they let you decide which way to go, what to try. Which do you prefer: Do you want to be told "Do this" ...or would you rather be told "Here's some ideas ...but you decide if you want to try them." Which is more helpful to you, to be told what to do, or to make your own decisions?

E: Never give advise, "oh you should tell him/her to stay away from you" the person your talking with might think ---yeah right but your wrong---(end of conversation), ask if its ok to do this, make some suggestions, ask question, "have you ever thought doing this and think about it"?

M: You said the counselor should not give advice, should not say, "Oh you should ..." because the client would think 'yeah right but you're wrong' and end of conversation. Can you tell me a little more about WHY the counsellor should not tell the client what to do ...why it might be wrong ...why it could end the conversation?

E: First the counselor does not know what he/she did or tried to do things before seek for help. The client will think 'the counselor didn't know where I am.

When I walked into the store and started to browse around, in the south especially in the big markets the keeper (I don't know how you may call them) start to ask you a questions and wanted to help you even making a suggestions what is good for you. This kind of action to me makes me turned off, just making feel like wanted to walk out of the store. I don't like people to tell me what to buy or what to get or this one suites for you type of thing. But simple question could make me to ask for more info "may I help you?" pause ...that is to me opens a communication.

M: You also said that it is helpful for the counsellor to talk about their own similar experience and how they handled it. It seems to me that you're saying that you would then feel more understood, and would have more hope that a solution is possible?

E: If I ask for help (as a client) about my child that he/she did something wrong, why this happens to me, but if you (the counselor) didn't have any kids before "to explain how you do to your kids" in other words you (the counselor) has no experience on this subject. I (the client) would say in my mind "you won't understand me where I am".

M: But how about them telling you about 'their way of handling it' ... might that not seem like advice? How would you see it?

E: Yes you can tell them what happen in your life to let them know that you understand his/her problem (s). It does not give advise how you solve your own problem (s) it gives an idea to the client and it would be helpful to make the client know that the problem can be solved.

M: Some counselors really encourage a client to talk about their feelings. But some people are sometimes uncomfortable talking about feelings. How do you feel about this?

a) Do you think it would be helpful or not helpful to talk about your feelings? (Why?)
b) What should the counsellor do ...encourage you to express feelings, or just let you talk about such things if and when you want to?

E: The feeling inside will come out sooner or later, but you (the counselor) have to make sure that the things come out will never be heard by anyone. Some feelings are deeper than others, some are today's world i.e. my girl does not want to see me anymore, I feel lonely. Some are sexual abuse that has to come out the hard way i.e. if I'm mad at my accused person I need a punching bag.

It is helpful to talk about your feelings only if it goes to the right person. It helps to relief on your anger, frustrations and guilt. It also makes you think straightforward, not bumping to one another, or do something that you did not want to do, or put some sugar into your soup instead of salt.

Talk about your experience, talk about how you felt when you were there. One thing you can't say to the client is -----I know how you feel---- that does not explain how you would felt if you would be in my shoes.

M: You mentioned that if a counsellor told you what you should do, or didn't understand YOUR situation/point of view, it could end the conversation. Can you think of any other kinds of counsellor behaviours might make you back off?

E: Being pushed to say things when I'm not ready to say anything. I (the client) want to know first if you can really help me, I wonder if you can understand my situation, I want to know where you were and how you did go through, or how you solve the problem.

M: You say that the things you might talk about should never be heard by anyone else. So you think that confidentiality is very important?

E: It is very important that the communication must be very confidential, the reason for that is to get trust from the councilor. It is up to the individual to say what he/she want to talk about his/her situation. If I hear anything about myself that no one should know about it and I know I've talk with one person about it then my feeling would be OH OH I've talk to the wrong person then the communication ends between you and me.

M: Also, when you say the counsellor should not say 'I know how you feel ...'do you mean that the counsellor wouldn't necessarily know how YOU feel, even if s/he had been in a similar situation?

E: When you are feeling frustrated, nobody know anything how you feel, even when someone say "I know how you feel" the question comes to my mind - really? then tell me!! The word "I know how you feel" if you say that in the beginning my mind say right away -yeah right- . But during the session if you say that "I know how you feel" and when I know that you have been there then I can take it as a support. Instead of saying in the first place "I know how you feel" tell me how you were with the similar situation I have, then I would know she/he know hoe I feel. As a client we always have a

question "could this person understands what is going on me? could he/she help me? does he/she really know how I feel? Like I said earlier at the store seems like the store keeper is telling me -I know what you want- same thing "I know how you feel".

M: If a counsellor gave you some ideas or suggestions, what would you do?

E: Before any kind of suggestions or ideas are given I must make sure that I am comfortable with a person. But in order to do that must first get trust. I would be grateful and thankful for any kind of help.

M: Different people are comfortable with different kinds of suggestions, and have different ways they want to deal with issues. For example, I personally would not find it helpful to join a group or to spend a long time talking about my past. Yet those methods are very helpful to some people. In your experiences, what kinds of suggestions or activities have you found helpful when you've been trying to work through a problem or issue?

E: I personally would like to be alone, talking with a friend but sometimes I would like to talk to the group to see if I can get help or get information how I can dealt my situation. In my own small world I've done things that no one has done before, when my mind say that how could anyone know how I feel. I can open up if I find out that someone has gone through similar thing that I've done. This can be heard from the group that I can find out how they do in my situation. Having a group session sometimes opens an opportunity to speak, when I find out that this person has gone through and I'm not alone anymore.

M: What kind of person do you think a good counsellor should be? Can you describe some things about the person's personality? (e.g. warm or detached, acting professional or being more like an ordinary person, anything else ...) Again, there's no right or wrong answers ...just your opinion.

E: I don't like professionalism, because if I find out that the person could not help me even the person looks professional I'm totally off -goodbye and good luck, see you later alligator. I don't like acting either, even the person thinks by acting he/she making a fool out of himself/herself, I do have a feeling when someone acts or say things that they don't totally know about. Remember you are the listener I am the speaker and I need help but I would like to get help where the person can listen not telling. When you look's like a professional you are saying -I'm better than you and your not.

Looks makes a lot deferent. when you looks too shabby than I will say he/she does not know how to dress than he/she does not know how to listen. The first contact is very important and very critical to your client. If you turn it off without knowing it you turn it off for the rest of your life. After a few sessions or after a few minutes or hours than you can say or make any suggestion (s). First of all the most important thing is that you the councilor don't want to lose your client, sometimes even in the middle of the session it can happen.

People talk to others and without knowing that they are advertising a person they do advertise. For example: I was talking with Marja and she help me a lot with my ---------- so and so. Without knowing or without any hints from the listener, the listener going to say "Oh I should give a Marja a call". This is where the critical moments comes, because sometimes they (the client) already have something in their mind what to say or what to do that you won't have any clue what he/she will start.

No acting, no judging, be yourself and it pays.

M: You've talked about several things already ....counsellor understanding your situation and letting you know they understand, not telling you what to do, privacy/confidentiality, etc. Is there anything else you want to add that you think is helpful and necessary for a counsellor to do ...anything else you think is important?

Anything else that you think a counsellor should not do?

E: Sometimes (but not for all of them and it's a critical decision) it's a good thing to give a reminder. I kept saying that you need to explain the past experience. If you have no similar experience sometime you can tell the story that you know and how it happened.

This I've heard from a friend but I don't know if you know about it and it remind me how I should treat my family and friends. There were two men both have a wife and a family, both are working on the construction site. Most of the time its very stressful working in that site. One day the other mans car broke and his friend has to bring him home after work, you know how it feels when everything not working right nothing works. So they went to his house went to the drive way and both were going to the house but the person who live in that house walk out of the car and touch the tree and he was silent for few minutes then walk into the house. As he walk into

the house he was feeling well kiss his wife say hello to his kids so on as usual he was feeling well.

Day's pass the other guy has a question why he touches the tree and be silent for a moment? So he asked why he did that? then he said "you know everyday we work in a very stressful place and that feeling hurts when you take it home so that tree what I did was to get rid of my stress because I want to go home peacefully to my family so they won't feel my frustration.

I don't know if I get the whole story but this is what I understand and I've learned that sometimes we do give our frustration and anger to the wrong people. So if your frustrated with the work and things around you don't give it to your love ones it does not belong to them and they don't need it.

M: Right near the end, you mentioned that a counsellor should not "judge". What do you mean by that ....what kinds of behaviours or words would you find judgmental? And WHY shouldn't a counsellor judge?

E: Maybe you are not trying hard enough, that's one action. I don't know what is the interpretation of a word Judge but in my interpretation is that telling one thing is that is not the way to do it. If you judge and say that's not the way to do it and if he/she finds out the way to do it is the way (you) ask not to do it then the client might say she was wrong.

OK if give you and example it might help what I mean by judge. On person ask or start talking about quitting a bad habit SMOKE. If you say that cold turkey doesn't work your judging how she/she should do.

M: Thank you! When I get this all written up, I'll send it to you and you can let me know if I'm wrong about anything.

E: Talk to you again some other time. Thank you to you too for getting me involved and letting me know more about me and letting learn more about the counselling.

Bibliography

Abbey, S. E., E. Hood, L. T. Young, and S. Malcolmson. New Perspectives on Mental Health Problems in Inuit Women. *Proceedings of the 8th Annual International Congress on Circumpolar Health 90*: 285-287. University of Manitoba Press, 1990.

Adler, A. *The Individual Psychology of Alfred Adler: A Systematic Presentation in Selections from his Writings*. Ed. H.L. Ansbacher and R. A. Ansbacher. New York: Harper and Row, 1956.

Adler, R. B. and N. Towne. *Looking Out/Looking In*. 8th ed. Toronto: Holt, Rinehart and Winston, 1996.

Alcoholics Anonymous World Services. *The Twelve Steps and Traditions*. New York: Alcoholics Anonymous, 1991.

Alladin, W. Models of Counselling and Psychotherapy for a Multiethnic Society. *Counselling in a multicultural society*, ed. S. Palmer and P. Laungani, 90-112. London: SAGE Publications, 1999.

Altheide, D. L. and J. M. Johnson. Criteria for Assessing Interpretive Validity in Qualitative Research. *Handbook of Qualitative Research,* ed. N. K. Denzin and Y. S. Lincoln, 485-499. London: SAGE Publications, 1994.

American Counselling Association. Code of Ethics. Alexandria, VA: ACA, 1995. ACA website: www.counselling.org/resources/codeofethics.htm

Anderson, J. R. *Cognitive Psychology and Its Implications*. New York: W. H. Freeman and Company, 1990.

Anoee, E. *Inuit Traditions*. Arviat, NT: Inuit Cultural Institute, 1978.

Appiah, K. Identity, Authenticity, Survival: Multicultural Societies and Social Reproduction. *Multiculturalism*, ed. A. Gutmann, 149-163. Princeton: Princeton University Press, 1994.

Arnakaq, M. Healing Circles. *Inuktitut* 85 (1999): 33-39.

Arredondo, P. Integrating Competencies and Universal Helping Conditions in Culture-Specific Contexts. *The Counseling Psychologist* 26 (July 1998), 592-601.

Atkinson, P. and M. Hammersley. Ethnography and Participant Observation. *Handbook of Qualitative Research*, ed. N.K. Denzin and Y.S. Lincoln, 248-261. London: SAGE Publications, 1994.

Avataq Cultural Institute. *Traditional Medicine Project*. Ottawa: Nortext, 1984.

Balikci, A. *The Netsilik Eskimo*. New York: The Natural History Press. 1970.

Ballard-Kent, J., and C. Cromwell. Challenges for Social Work Education North of 60°. *Canadian Social Work Review* (1985), 249-263.

Bandura, A. *Principles of Behaviour Modification*. New York: Holt Rinehart and Winston, 1969.

Bannister, D. and F. Fansella. *Inquiring Man*. London: Routledge, 1985.

Barnard, F. M. Introduction. *Herder on Social and Political Culture*, ed. and tr., F. M. Barnard. Cambridge: Cambridge University Press, 1969.

Barrera, J. Lighting the fire: new training helps new counsellors make new connections. *News North,* Oct. 2, 2000.

Bayne, R., I. Horton, T. Merry, E. Noyes and G. McMahon. *The Counsellor's Handbook*. 2nd ed. Cheltenham: Stanley Thornes (Publishers) Ltd., 1999.

Beck, A. *Cognitive Therapy and the Emotional Disorders*. New York: International Universities Press, 1976.

Belkin, G. S. *Introduction to Counseling*. 3rd ed. Dubuque, Iowa: Wm. C. Brown Publishers, 1988.

Benedict, R. *Patterns of Culture*. New York: Mentor Books, 1960.

Bennett, A. Proposal for the Development of a Human Services Program at Iqaluit. Iqaluit, NT: Arctic College, 1986.

Berger, T. *A Long and Terrible Shadow*. Toronto: Douglas and McIntyre, 1991.

Berne, E. *Games People Play*. New York: Grove Press, 1964.

Bernstein, R. J. *The Restructuring of Social and Political Theory*. London: Methuen & Co. Ltd., 1979.

Berry, J. W. Acculturation among circumpolar peoples: Implications for health status. *Arctic Medical Research* 40 (1985), 21-27.

Bhabha, H. K. *The Location of Culture*. London: Routledge, 1994.

Bimrose, J. Multiculturalism. *New Directions in Counselling*, ed. R. Bayne, I. Horton and J. Bimrose, 237-246. London: Routledge, 1996.

Bloom, J. D. Migration and Psychopathology of Eskimo Women. *American Journal of Psychiatry* 130: 4 (April 1973), 446-449.

Bloom, J. D. and R. D. Gelardin. Eskimo Sleep Paralysis. *Arctic* 29:1 (March 1976), 20-26.

Blue, W. and R. C. Annis. Counselling Native Canadians. *Intercultural Counselling and Assessment: Global Perspectives*, ed. R. J. Samuda and A. Wolfgang, 215-223. Toronto: C. J. Hogrefe, 1984.

Boas, F. *Race, Language and Culture*. Chicago: University of Chicago Press, 1982.

Bond, T. *Standards and Ethics for Counselling in Action*. London: SAGE Publications, 1998.

Bordin, E. S. The Generalizability of the Psychoanalytic Concept of Working Alliance. *Psychotherapy: Theory, Research and Practice* 16 (1979), 252-260.

Bor, R. and Watts, M. *The Trainee Handbook: A guide for counselling and psychotherapy trainees*. London: SAGE Publications, 1999.

Borre, K. The Healing Power of the Seal: The Meaning of Inuit Health Practice and Belief. *Arctic Anthropology* 31:1 (1994), 1-15.

Bowen, M. *Family Therapy in Clinical Practice*. New York: Aronson, 1978.

Brammer, L. M. *The Helping Relationship: Process and Skills*. 2nd ed. Englewood Cliffs, NJ: Prentice-Hall, 1979.

Brammer, L. M. and E. L. Shostrum. *Therapeutic Psychology: Fundamentals of Counselling and Psychotherapy*. Englewood Cliffs, NJ: Prentice-Hall, 1960.

Brier, A. and J. S. Strauss. The Role of Social Relationships in the Recovery From Psychiatric Disorder. *American Journal of Psychiatry* 141 (1984), 949-955.

Briggs, J. L. *Never in Anger*. Cambridge, MA: Harvard University Press, 1970.

_____. *Aspects of Inuit Socialization*. Ottawa: National Museum of Man Mercury Series, 1979a.

_____. Socialization, Family Conflicts and Responses to Culture Change Among Canadian Inuit. *Arctic Medical Research* 40 (1985), 40-52.

_____. Playwork as a tool in the socialization of an Inuit child. *Arctic Medical Research* 49 (1990), 34-38

_____. Vicissitudes of attachment: Nurturance and dependence in Canadian Inuit family relationships, old and new. *Arctic Medical Research* 54 (1995), 24-32.

Brisset, D. and C. Edgley, eds. *Life as Theater: A Dramaturgical Sourcebook*. 2nd ed. New York: Aldine de Gruyter, 1990.

Brody, H. *The People's Land: Inuit, Whites and the Eastern Arctic*. Vancouver: Douglas and McIntyre, 1991.

Brown, D. E. *Human Universals*. New York: McGraw Hill Inc., 1991.

Bryman, Alan. *Quantity and Quality in Social Research*. London: Routledge, 1996.

Buss, D. M. Evolutionary Personality Theory. *Annual Review of Psychology* 42 (1991), 459-491.

Cade, B. and O'Hanlon, W. H. *A Brief Guide to Brief Therapy*. New York: W. W. Norton and Company, 1993.

Callaway, M. and P. Suedfeld. Residents' assessment of a community-based alcohol initiative in the Canadian Arctic. *Arctic Medical Research* 54 (1995), 184-191.

Canadian Association of Social Workers. *Code of Ethics*. Ottawa: Myropen Publications, 1994.

Canadian Counselling Association. Code of Ethics. Ottawa: CCA, 1999. CCA website: www.ccacc.ca/coe.htm

Canadian Mental Health Association/Northwest Territories. *Suicide: Guidelines for Helpers*. Yellowknife, NT: Government of the Northwest Territories Department of Health, n.d.

Canadian Psychiatric Association. *Native Adolescents: Stepping Stones to the Future*. Proceedings of the 1988 Meeting on Native Mental Health. Halifax, 1988.

Canton, M. Words that help healing. *News North*, March 20, 2000.

Carkhuff, R. R., R. M. Pierce, and J. R. Cannon. *The Art of Helping*. Amherst, MA: Human Resources Development Press, 1977.

Carter, R. T. Cultural Values: A Review of Empirical Research and Implications for Counseling. *Journal of Counseling and Development* 70 (September/October 1991), 164-173.

Cashdan, S. *Object Relations Therapy*. New York: W .W. Norton and Company, 1988.

Castellano, M., Brant, H. Stalwick, and F. Wien. Native Social Work Education in Canada: Issues and Adaptations. *Canadian Social Work Review* (1986), 166-184.

Clark, P. Lecture, University of Durham, May 5, 1999.

Clark, R. E. *Dimensions of Moral Education*. Toronto: University of Toronto Press, 1984.

Clifford, J. *The Predicament of Culture: Twentieth-Century Ethnography, Literature and Art*. Cambridge, MA: Harvard University Press, 1988.

Condon, R. G. *Inuit Youth: Growth and Change in the Canadian Arctic*. New Brunswick: Rutgers University Press, 1988.

Corey, G. *Theory and Practice of Counseling and Psychotherapy*. 5th ed. Pacific Grove, CA: Brooks/Cole, 1996.

Corey, M. S. & G. Corey. *Becoming a Helper*. 2nd ed. Pacific Grove, CA: Brooks/Cole Publishing Company, 1993.

Corey, G., M. S. Corey, and P. Callanan. *Issues and Ethics in the Helping Professions*. 4th ed. Pacific Grove, CA: Brooks/Cole Publishing, 1993.

Cormier, W. H. and L. S. Cormier. *Interviewing Strategies for Helpers: Fundamental Skills and Cognitive-Behavioral Interventions*. Monterey, CA: Brooks/Cole Publishing Company, 1985.

Craib, I. *Modern Social Theory: From Parsons to Habermas*. Hertfordshire: Prentice Hall/Harvester Wheatsheaf. 1992.

Crowe, K. *A History of the Original Peoples of Northern Canada*. Montreal: McGill and Queens University Press, 1986.

Culley, S. *Integrative Counselling Skills in Action*. London: SAGE Publications, 1998.

Das, A. K. Rethinking Multicultural Counselling: Implications for Counsellor Education. *Journal of Counseling and Developmen*t 74 (September/October 1995), 45-50.

de Shazer, S. *Keys to Solutions in Brief Therapy*. New York: Norton, 1985.

Delaney, R. Northern Social Work Practice: An Ecological Perspective. *Northern Social Work Practice* 4, eds. R. Delaney and K. Brownlee, 1-23. Thunder Bay, ON: Centre for Northern Studies, Lakehead University, n.d.

Delaney, R. and K. Brownlee. Ethical Considerations for Northern Social Work Practice. *Northern Social Work Practice* 4, eds. R. Delaney & K. Brownlee, 35-57. Thunder Bay, ON: Centre for Northern Studies, Lakehead University, n.d.

Delaney, R., K. Brownlee, M. Sellick and D. Tranter. Ethical Problems Facing Northern Social Workers. *The Social Worker* 65 (Fall 1997), 55-65.

Denscombe, M. *The Good Research Guide: For Small-Scale Social Research Projects*. Buckingham: Open University Press, 1998.

Denzin, N. K. and Y. S. Lincoln. *Strategies of Qualitative Inquiry*. London: SAGE, 1999.

_____. Introduction: Entering the Field of Qualitative Research. *Handbook of Qualitative Research*, eds N. K. Denzin and Y. S. Lincoln, 1-17. London: SAGE Publications, 1994.

Department of Indian and Northern Affairs Canada. *First Nations in Canada*. Ottawa: Ministry of Public Works and Government Affairs, 1997.

Digman, J.M. Personality Structure: Emergence of the Five-Factor Model. *Annual Review of Psychology* 41 (1990), 417-440.

Diubaldo, R. *The Government of Canada and the Inuit, 1900-1967*. Ottawa: Indian and Northern Affairs, 1985.

Doyal, L. and I. A. Gough. *Theory of Human Need*. London: McMillan Education Ltd., 1991.

Dryden, W. and R. DiGuiseppe. *A Primer on Rational-Emotive Therapy*. Champaign, IL: Research Press, 1990.

Egan, G. *Exercises in Helping Skills: A Training Manual to Accompany The Skilled Helper*. 2nd ed. Belmont, CA: Wadsworth, Inc., 1982.

_____. *The Skilled Helper: A Systematic Approach to Effective Helping*. 3rd ed. Monterey, CA: Brooks/Cole Publishing Company, 1986.

_____. *The Skilled Helper: A Problem-Management Approach to Helping*. 5th ed. Pacific Grove, CA: Brooks/Cole Publishing Company, 1994

Eichenbaum, L. and S. Orbach. *Understanding Women: A Feminist Psychoanalytic Approach*. New York: Basic Books, 1983.

Elden, M. Sharing the research work: participative research and its role demands. *Human Inquiry: A Sourcebook of New Paradigm Research,* ed. P. Reason and J. Rowan. Toronto: John Wiley & Sons, 1997.

Ellis, A. and W. Dryden. *The Practice of Rational Emotive Behavior Therapy*. New York: Springer Publishing Co. Inc, 1997

Ellis, A. and R. A. Harper. *A Guide to Rational Living*. Englewood Cliffs, NJ: Prentice-Hall Inc., 1961.

_____. *A New Guide to Rational Living*. Hollywood, CA: Wilshire Book Company, 1975.

Ely, M., M. Anzul, T. Friedman, D. Garner, and A. M. Steinmetz. *Doing Qualitative Research: Circles Within Circles.* New York: The Falmer Press, 1996.

Ember, C.R. and M. Ember. *Cultural Anthropology*. 9th ed. Upper Saddle River, NJ: Prentice Hall, 1999.

Erikson, E. H. *Childhood and Society*. 2nd ed. New York W. W. Norton, 1963.

Ernerk, Peter. Inuit Silattuqsarvingat – The Inuit University of the North. *Social Sciences in the North*, ed. L-J. Dorais, and L. Muller-Wille, 11-14. Ste-Foy, PQ: International Arctic Social Sciences Association, 1993.

Essandoh, P. E. Multicultural Counselling as the 'Fourth Force': A Call to Arms. *The Counselling Psychologist* 24 (January 1996): 126-137.

Fairbairn, W.R.D. *An Object Relations Theory of Personality*. New York: Basic Books, 1954.

Feehan, K. and D. Hannis, eds. *From Strength to Strength: Social Work Education and Aboriginal People*. Edmonton: Grant McEwan Community College, 1993.

Feltham, C. *What is Counselling?* London: Sage Publications, 1997.

Feltham, C. and W. Dryden. *Dictionary of Counselling*. London: Whurr, 1993.

Ferraro, G. *Cultural Anthropology: An Applied Perspective*. New York: West Publishing Co., 1995.

Fischer, A. R., L. M. Jome, and D. R. Atkinson. Reconceptualizing Multicultural Counseling: Universal Healing Conditions in a Culturally Specific Context. *The Counselling Psychologist* 26 (July 1998a): 525-588.

_____. Back to the Future of Multicultural Psychotherapy With a Common Factors Approach. *The Counseling Psychologist* 26 (July 1998b): 602-606.

Fishman, J. A. A Systemization of the Whorfian Hypothesis. *Culture and Cognition: Readings in Cross-Cultural Psychology*, eds. J.W. Berry and P. R. Dasen, 61-85. London: Methuen & Co Ltd., 1974.

Fletcher, J. E. Social Work Education for Inuit: Some Value Conflict and Ethical Concerns. M.Ed. thesis. Vancouver: University of British Columbia, 1998.

Fouad, N. A. Balancing Client and Cultural Specificity. *The Counseling Psychologist* 23 (January 1995): 63-67.

Fox, R. State of the Art/Science in Anthropology. *The Flight From Science and Reason*, eds. P. R. Gross, N. Levitt, and M. W. Lewis, 327-345. New York: The New York Academy of Sciences, 1997.

Forsius, H. Problems in Families With an 'Absent Father'. *Arctic Medical Research* 40 (1985): 80-83.

Frank, J.D. *Persuasion and Healing: A Comparative Study of Psychotherapy*. New York: Schocken Books, 1963.

Frank, J. D. and J. B. Frank. Commenting on 'Reconceptualizing Multicultural Counseling: Universal Healing Conditions. *The Counseling Psychologist* 26 (July, 1998): 589-591.

Frankl, V. *Man's Search for Meaning*. Boston: Beacon, 1963.

Freeman, D. *Margaret Mead and the Heretic: The Making and Unmaking of an Anthropological Myth*. Toronto: Penguin Books, 1996.

Freuchen, P. *Book of the Eskimo*. New York: Bramhall House, 1961.

Freud, S. *Civilization, Society and Religion: Group Psychology, Civilization and Its Discontents and Other Works*. Markham, ON: Penguin Books, 1962.

_____. *Introductory Lectures on Psychoanalysis*. Markham, ON: Penguin Books, 1973.

_____. *The Interpretation of Dreams*. Markham, ON: Penguin Books, 1976.

_____. *On Sexuality: 3 Essays on the Theory of Sexuality and Other Works*. Markham, ON: Penguin Books, 1977.

Friedman, J. *Cultural Identity and Global Process*. London: SAGE Publications, 1994.

Fukuyama, F. *The End of History and the Last Man.* New York: Avon Books, 1992.

_____. *The Great Disruption: Human Nature and the Reconstitution of Social Order*. London: Profile Books, 1999.

Garfield, S. L. Research on Client Variables. *Handbook of Psychotherapy and Behavior Change*, eds. S. L. Garfield and A. E. Bergin, 4th ed.,190-228. New York: John Wiley and Sons, 1994.

Garfield, S. L. and A. E. Bergin, eds. *Handbook of Psychotherapy and Behaviour Change*. 4th ed. New York: John Wiley and Sons, 1994.

Geertz, C. *The Interpretation of Cultures*. New York: Basic Books, 1973.

_____. *Local Knowledge: Further Essays in Interpretive Anthropology*. New York: Basic Books, Inc., 1983.

Gelatt, H.B. Positive Uncertainty: A New Decision-Making Framework for Counselling. *Journal of Counselling Psychology* 36:2 (1989): 252-256.

Gendlin, E. T. *Focusing*. New York: Everett House, 1978.

Gibb, J. R. The Counselor as a Role-Free Person. *Counseling Theories and Counselor Education*, ed. C.A. Parker. Boston: Houghton-Mifflin, 1968.

Gilmore, S. K. A Comprehensive Theory for Eclectic Intervention. Paper presented at the University of Thessalonika, Greece, 1980.

Glaser, B. G. and A. L. Strauss. *The Discovery of Grounded Theory: Strategies for Qualitative Research*. New York: Aldine de Gruyter, 1967.

Glasser, W. *Reality Therapy: A New Approach to Psychiatry*. Toronto: Harper and Row, 1965; reprint, Harper and Row Perennial Library, 1975.

_____.*Reality Therapy in Action*. New York: HarperCollins Publishers, 2000.

Gordon, S. *The History and Philosophy of Social Science*. London: Routledge, 1997.

Government of the Northwest Territories. *A View of the Future of Social Services for the N.W.T.* Yellowknife, NT: Department of Health and Social Services, 1990.

_____. Strength at Two Levels: Report of the Project to Review the Operations and Structure of Northern Government. Yellowknife, NT: GNWT, 1991.

_____. Working Together for Community Wellness: A Directions Document. Yellowknife: Department of Health and Social Services, 1995.

_____. *Inuuqatigiit*: *The Curriculum From the Inuit Perspective*. Yellowknife, NT: Department of Education, Culture, and Employment, 1996.

_____. Suicide in the Northwest Territories: A Descriptive Summary. Yellowknife, NT: Department of Health and Social Services, 1998.

Government of Nunavut. Bathurst Mandate *Pinasuaqtavut*: That which we've set out to do. Internet: www.gov.nu.ca, n.d.

Government of Nunavut Bureau of Statistics. Community Population Estimates. Internet: www.stats.gov.nu.ca/#demo, updated March 1999.

Government of Nunavut Department of Health and Social Services. National Native Alcohol & Drug Abuse Program: 1999-2000 Year-End Report, n.d.

Government of Nunavut Legislative Assembly. *Hansard*. Members' Statements. May 27, 1999: 73-1(2).

Green, J. W. *Cultural Awareness in the Human Services*. Englewood Cliffs, NJ: Prentice-Hall Inc., 1982.

Grenier, Richard. *Capturing the Culture: Film, Art, and Politics*. Washington, DC: Popular Culture, Film, Ethics and Public Policy Center, 1991.

Griswold, W. *Cultures and Societies in a Changing World*. London: Pine Forge Press, 1994.

Guba, E.G. and Y. S. Lincoln. Competing Paradigms in Qualitative Research. *Handbook of Qualitative Research,* eds. N.K. Denzin and Y. S. Lincoln, 105-117. London: SAGE publications, 1994.

Guemple, L. Men and Womwn, Husbands and Wives: The Role of Gender in Traditional Inuit Society. *Etudes Inuit Studies* 10(1986): 9-24.

Habermas, J. Struggles for Recognition in the Democratic Constitutional State. *Multiculturalism*, ed. A. Gutmann, 107-148. Princeton: Princeton University Press: 1994.

Hall, C. F. *Arctic Researches and Life Among the Esquimaux: Being the Narrative of an Expidition in Search of Sir John Franklin in the Years 1860, 1861, 1862*. New York: Harper and Brothers Publishers, 1865.

Halpern, J. M. The Inuit Aspects of Mental Health: An Approach Utilizing Linear and Cyclical Time Concepts. *Collegium antropologicum* 11: 1 (1987): 213-226.

Hammersley, M. *What's Wrong With Ethnography? Methodological Explorations*. London: Routledge, 1992.

Hammond, P. B. *An Introduction to Cultural and Social Anthropology*. Toronto: Collier-Macmillan Canada, Ltd., 1971.

Harris, T. A. *I'm OK – You're OK*. London: Pan Books, 1977.

Heppner, P. P. Identifying the Complexities Within Clients' Thinking and Decision-Making. *Journal of Counselling Psychology* 36 (1989): 257-259.

Heppner, P. P. and C. D. Claiborn. Social Influence Research in Counselling: A Review and Critique. *Journal of Counselling Psychology* 36 (1989): 365-387.

Hepworth, D. H. and J. A. Larsen. *Direct Social Work Practice: Theory and Skills*. 4th ed. Pacific Grove, CA: Brooks/Cole Publishing Company, 1993.

Herder, J. G. Ideas for a Philosophy of History. *Herder on Social and Political Culture*, ed., F. M. Barnard, 313. Cambridge: Cambridge University Press, 1969.

_____. The Origin of Language. *Herder on Social and Political Culture*, ed., F. M. Barnard, 173. Cambridge: Cambridge University Press, 1969.

Ho, D.Y.F. Internalized Culture, Cultrocentrism, and Transcendence. *The Counseling Psychologist* 23 (January 1995): 4-24.

Holstein, J. A. and J. F. Gubrium. Phenomenology, Ethnomethodology, and Interpretive Practice. *Handbook of Qualitative Research*, eds. N.K. Denzin and Y. S. Lincoln, 262-272. London: SAGE Publications, 1994.

Hood, E., L. T. Young, S. Abbey and S. A. Malcolmson. Psychiatric Delivery in the Eastern Canadian Arctic. *Proceedings of the 8th International Congress on Circumpolar Health* 90, 288-289. University of Manitoba Press, May 1990.

Howard, M. C. and J. Dunaif-Hattis. *Anthropology: Understanding Human Adaptation.* New York: HarperCollins Publishers, 1992.

Huberman, A. M. and M. B. Miles. Data Management and Analysis Methods. *Handbook of Qualitative Research*, eds. N. K. Denzin and Y. S. Lincoln, 428-444. London: SAGE Publications, 1994.

Hutchins, D. E. and C. G. Cole. *Helping Relationships and Strategies*. 2nd ed. Pacific Grove, CA: Brooks/Cole Publishing Company, 1992.

Ibrahim, F. A. Contribution of Cultural Worldview to Generic Counselling and Development. *Journal of Counselling and Development* 70 (September/October 1991), 13-19.

Indian and Northern Affairs Canada and Tungavik Federation of Nunavut. Agreement Between the Inuit of the Nunavut Settlement Area and Her Majesty the Queen in Right of Canada. Ottawa, 1993.

Inuit Cultural Institute. *Recollections of Levi Iqalujjuaq: The Life of a Baffin Island Hunter*. Arviat, NT: Inuit Cultural Institute, 1988.

Irwin, C. *Lords of the Arctic: Wards of the State. Summary Report for the Review of Demography and Its Implications for Economic and Social Policy*. Ottawa: Health and Welfare Canada, 1988.

Ivey, A. *Basic Attending Skills*. North Amherst, MA: Microtraining, 1976.

_____. *Counseling and Psychotherapy: Connections and Applications*. New York: Prentice Hall, 1980.

Ivey, A. E., M. B. Ivey and L. Simek-Morgan. *Counselling and Psychotherapy: A Multicultural Perspective*. 4th ed. London: Allyn and Bacon, 1997.

Ivey, A. and N. Gluckstern. *Basic Influencing Skills: Participants Manual*. North Amherst, MA: Microtraining, 1976.

Jackson, G. The Emergence of the Black Perspective in Counselling. *Black Psychology*, ed. R. Jones. New York: Harper and Row, 1980. Cited in K. Minor, *Issumatuq: Learning From the Traditional Healing Wisdom of the Canadian Inuit*. Halifax, NS: Fernwood Publishing, 1992.

Janesick, V. J. The Dance of Qualitative Research Design: Metaphor, Methodolatry, and Meaning. *Handbook of Qualitative Research*, N.K. Denzin & Y. S. Lincoln, eds. London: SAGE Publications, 1994, 209-219.

Jung, C. G. *Man and His Symbols*. New York: Doubleday, 1964.

Kabel, M. and N. Lyberth. Experiences from a consultive journey to Greenland presented by a child psychiatrist and a psychologist. *Arctic Medical Research* 54 (1995), 74-76.

Kagan, N. Presidential Address: District 17: American Psychological Association. *Counselling Psychologist* 7 (1977), 4-8.

Kiesler, D. J. and J. C. Auchin. *Handbook of Interpersonal Psychotherapy*. Elmsford, NY: Pergamon, 1982.

Kirmayer, L. J., L. J. Boothroyd, and S. Hodgins. Attempted Suicide Among Inuit Youth: Psychosocial Correlates and Implications for Prevention. *Canadian Journal of Psychiatry* 43 (October 1998), 816-827.

Kirmayer, L. J., C. M. Fletcher and L. J. Boothroyd. Inuit Attitudes Toward Deviant Behaviour: A Vignette Study. *The Journal of Nervous and Mental Disease* 185: 2 (1997), 78-86.

_____. Suicide among the Inuit of Canada. *Suicide in Canada*, eds. A. A. Leenaars, S. Weckenstern, S. Sakinofsky, R. J. Dyck, M. J. Kral and R. C. Bland, 189-211 Toronto: University of Toronto Press, 1998.

Kluckhohn, C. *Culture and Behavior*. New York: The Free Press, 1962..

_____. *Mirror for Man: The Relation of Anthropology to Modern Life*. New York: McGraw Hill Book Company, 1971.

Kottak, C.P. *Anthropology: The Exploration of Human Diversity*. 5th ed. Toronto: McGraw-Hill, Inc., 1991.

Kral, M., with M. Arnakaq, N. Ekho, O. Kunuk, E. Ootoova, M. Papatsie and L. Taparti. Stories of Distress and Healing: Inuit Elders on Suicide. *Suicide in Canada*, eds. A. A. Leenaars, S. Weckenstern, S. Sakinofsky, R. J. Dyck, M. J. Kral and R. C. Bland, 179-188. Toronto: University of Toronto Press, 1998.

Krause, I-B. *Therapy Across Culture.* London: SAGE Publications, 1998.

Kreutzmann, G. A one year Greenlandic study of temporary and permanent placement of children and adolescents outside their homes. *Arctic Medical Research* 54, Suppl. 1 (1995), 68-73.

Kroeber, A. L. and C. Kluckhohn. *Culture: A Critical Review of Concepts and Definitions*. Cambridge, MA: Harvard University Press, 1952.

Kroeber, A. L. *The Nature of Culture*. Chicago: University of Chicago Press, 1952.

Kruger, A. The Nature of Humor in Human Nature: Cross-Cultural Commonalities. *The Counselling Psychology Quarterly* 9 (1996): 235-241.

Kublu, A. Reading What Inuit Say. Unpublished paper, Iqaluit, April 19, 1996.

Kuehlwein, K. T. and H. Rosen, eds. *Cognitive Therapies in Action: Evolving Innovative Practice*. San Francisco: Jossey-Bass Publishers, 1993.

Laing, R. D. *Self and Others*. New York: Pantheon Books, 1969.

Lambert, M. J. and A. E. Bergin. The Effectiveness of Psychotherapy. *Handbook of Psychotherapy and Behavior Change*, eds. S. L. Garfield and A. E. Bergin, 4th ed., 143-189. New York: John Wiley & Sons, 1994.

Larrain, J. *Ideology and Cultural Identity: Modernity and the Third World Presence*. Cambridge: Polity Press, 1994.

Laungani, P. Replacing Client-Centred Counselling With Culture-Centred Counselling. *Counselling Psychology Quarterly* 10 (1997): 343-351.

_____. Client Centred or Culture Centred Counselling. *Counselling in a multicultural society*, eds. S. Palmer and P. Laungani, 132-152. London: SAGE Publications, 1999.

Lazarus, A. *Multimodal Behaviour Therapy*. New York: Springer-Verlag, 1976.

Leach, E. *Levi-Strauss*. London: Fontana Press, 1985.

Lee, C. C. and B. L. Richardson. *Multicultural Issues in Counseling: New Approaches to Diversity*. Alexandria, VA: American Association of Counseling and Development, 1991.

Leenars, A. A., C. Brown, L. Taparti, J. Anowak and Trish Keddie-Hill. Genocide and Suicide Among Indigenous People: The North Meets the South. *The Canadian Journal of Native Studies* XIX: 2 (1999), 337-363.

Legat, A., ed. *Report of the Traditional Knowledge Group*. Yellowknife, NT: GNWT, 1991.

Leigh, J. W. *Communicating for Cultural Competence.* Boston: Allyn and Bacon, 1998.

Levi-Strauss, C. *Structural Anthropology.* Vol. 1. London: Penguin Books, 1993.

_____. *The Savage Mind.* Chicago: University of Chicago Press, 1966.

Lewinsohn, P. M., D. O. Antonuccio, J. S. Breckenridge and L. Teri. *Coping With Depression*. Eugene, OR: Castalia, 1984.

Lincoln, Y. S. and E.G. Guba. *Naturalistic Inquiry*. London: SAGE Publications, 1985.

Locke, D. C. *Increasing Multicultural Understanding: A Comprehensive Model.* Multicultural Aspects of Counselling Series 1. ed. P. Pedersen. Newbury Park, CA: SAGE Publications, 1992.

Loesch, L. C. Preparation for Helping Professionals Working With Diverse Populations. *Experiencing and Counseling Multicultural and Diverse Populations*, ed. N.A. Vacc, S. B. DeVaney, and J. Wittmer. 3rd ed., 339-362. Bristol, PA: Accelerated Development, 1995.

Macionis, J. J., C. M. Benoit, and S. M. Jansson. *Society: The Basics.* Canadian ed. Scarborough, ON: Prentice Hall Canada Inc., 1999.

Mala, T. A. Alcoholism and Mental Health Treatment in Circumpolar Areas: Traditional and Non-traditional Approaches. *Proceedings of the 6th International Congress on Circumpolar Health* 84. 332-334. Seattle, WA: University of Washington Press, May 1984.

Malaspina College, Native Infant Education and Care Program. *The Teachings of the Elders*. Duncan, BC: Health and Welfare Canada, 1980.

Malinowski, B. *Sex and Repression in Savage Society*. London: Routledge and Kegan Paul, 1953.

Marshall, G. *Dictionary of Sociology*. Oxford: Oxford University Press, 1998.

Maslow, A. *Motivation and Personality*. New York: Harper & Row, Publishers, 1954a.

_____. *Toward a Psychology of Being*. New York: Van Nostrand Reinhold, 1954b.

May, R. *Psychology and the Human Dilemma*. New York: Van Nostrand, 1967.

McCluskey, K. A Good Residential School? *News North Nunavut* (Yellowknife), 1 February 1999, A9.

McCormick, R. M. Ethical Considerations in First Nations Counselling and Research. *Canadian Journal of Counselling* 32 (October 1998), 284-297.

McLeod, J. *Doing Counselling Research*. Thousand Oaks, CA: SAGE Publications, 1994.

_____. *An Introduction to Counselling*. 2nd ed. Buckingham: Open University Press, 1998.

_____. *Practitioner Research in Counselling.* London: SAGE Publications, 1999.

Mead, M. *Coming of Age in Samoa*. New York: Mentor Books, 1963.

Mearns, D. and B. Thorne. *Person-Centred Counselling in Action*. London: SAGE Publishing, 1997.

Meier, S. T. and S. R. Davis. *The Elements of Counseling*. 2nd ed. Pacific Grove, CA: Brooks/Cole Publishing Company, 1993.

Merchant, N. and P. Dupuy. Multicultural Counselling and Qualitative Research: Shared Worldview and Skills. *Journal of Counselling and Development* 74 (July/August 1996), 537-541.

Miller, B. D. *Cultural Anthropology.* Boston: Allyn and Bacon, 1999.

Miller, M. and B. F. Crabtree. Clinical Research. *Handbook of Qualitative Research,* eds. N. K. Denzin and Y. S. Lincoln, 340-352. London: SAGE Publications, 1994.

Milner, P. and S. Palmer. *Integrative Stress Counselling: A Humanistic Problem-Focused Approach*. London: Cassell, 1998.

Milnes, A. Grade Expectations: Number of Graduates is Increasing in Northern Communities. *News North Nunavut* (Yellowknife), 1 February 1999, A3.

Minor, N. Kathleen. A Review of Counselling Among Cultures with Emphasis Upon Culture-Specific Counselling Within the Inuit Society: A Method and Training Program. D.Ed. dissertation, University of Massachusetts, 1983.

_____ (Kit). *Issumatuq [sic]: Learning From the Traditional Healing Wisdom of the Canadian Inuit*. Halifax: Fernwood Publishing, 1992.

Morse, J. M. Designing Funded Qualitative Research. *Handbook of Qualitative Research*, eds. N. K. Denzin and Y. S. Lincoln, 220-235. London: SAGE Publications, 1994.

Munro, A., B. Manthei and J. Small. *Counselling: The Skills of Problem-Solving*. London: Routledge, 1995.

Murdock, G. P. *Culture and Society*. Pittsburgh, PA: University of Pittsburgh Press, 1965.

Naiman, J. *How Societies Work: Class, Power and Change in a Canadian Context*. Concord, ON: Irwin Publishing, 1997.

Nelson-Jones, R. *The Theory and Practice of Counselling*. 2nd ed. London: Cassell, 1997.

Newman, P. C. *Company of Adventurers*. Vol. I. Markham, ON: Penguin Books Canada Limited, 1986.

_____. *Company of Adventurers*. Vol. II. Markham, ON: Penguin Books Canada Limited, 1988.

Niemeyer, G. J. *Constructivist Assessment: A Casebook*. London: SAGE, 1993.

Nunavut Implementation Commission. Footprints 2: A Second Comprehensive Report of the Nunavut Implementation Committee. Iqaluit, NT: NIC, 1996.

Nussbaum, M.C. *Cultivating Humanity: A Classical Defense of Reform in Liberal Education*. Cambridge: Harvard University Press, 1997.

Nutarak, J. Standing Committee on Culture, Education and Health: Report on the 1999-2000 Six-Month Departmental Progress Updates. Iqaluit: Government of Nunavut, October 1999.

Nwachuku, U. T. and A. E. Ivey. Culture-Specific Counseling: An Alternative Model. *Journal of Counseling and Development* 70, September/October 1991, 106-111.

Oakes, J. and R. Riewe. *Culture, Economy, and Ecology: Case Studies From the Circumpolar Region*. Millbrook, ON: The Cider Press, 1997.

Obeyesekere, G. *The Work of Culture: Symbolic Transformation in Psychoanalysis and Anthropology*. London: The University of Chicago Press, 1990

Okun, B. *Working With Adults: Individual, Family and Career Development*. Pacific Grove, CA: Brooks Cole, 1984.

_____. *Effective Helping: Interviewing and Counselling Techniques*. 4th ed. Pacific Grove, CA: Brooks/Cole Publishing Company, 1992.

Okalik, L., with E. Lapage. Healing Circles in Nunavik. *Inuktitut* 81 (1997), 45-58.

Olsen, O. R. Cultural Change and Health Consequences in Inuit. In *Arctic Medical Research* 40 (1985), 28-31.

Orso, E. G. Folklore and Identity. *Social and Cultural Identity: Problems of Persistence and Change,* 24-38. Athens, GA: Southern Anthropological Society, 1974.

Owingayak, D. *On Snowmobile and Foot: Travels Across the Barrenlands*. Arviat. NT: Inuit Cultural Institute, 1986.

Oxford University. *The New Oxford Dictionary of English*. New York: Oxford University Press, 1998.

Palmer, S. Developing an Individual Counselling Programme: A Multimodal Perspective. *Counselling in a multicultural society*, eds. S. Palmer and P. Laungani. London: SAGE Publications. 174-202.

Paniagua, F. A. *Assessing and Treating Culturally Diverse Clients: A Practical Guide*. Multicultural Aspects of Counseling Series 4, ed. P. Pedersen. London: SAGE Publications, 1994.

Patterson, C. H. Multicultural Counselling: From Diversity to Universality. *Journal of Counseling and Development* 74 (January/February 1996). 227-237.

Pauktuutit (Inuit Women's Association). *A Community Perspective on Health Promotion and Substance Abuse*. Ottawa: Pauktuutit, 1990.

_____. *The Inuit Way: A Guide to Inuit Culture*. Ottawa: Pauktuutit, 1991.

_____. Inuit Mental Health Workshop Summary Report: Iqaluit 1993. Ottawa: Pauktuutit, 1993a.

_____. *Taimainnut: An Introduction to Basic Counselling Skills*. Ottawa: Pauktuutit, 1993b.

Payne, M., ed. *A Dictionary of Cultural and Critical Theory*. Malden, MA: Blackwell Publishers, 1998.

Pedersen, P. B. Intercultural Counselling: U.S. Perspectives. *Intercultural Counselling and Assessment: Global Perspectives*, eds. R. J. Samuda and A.Wolfgang, 71-79. Toronto: C. J. Hogrefe, 1984.

_____. ed. *The Handbook of Cross-Cultural Counselling and Theory*. Westport, CT: Praeger, 1985.

_____. Multiculturalism as a Generic Approach to Counselling. *Journal of Counseling and Development* 70 (September/October, 1991), 6-11.

_____. The Culture-bound Counsellor as an Unintentional Racist. *Canadian Journal of Counselling* 29:3 (July 1995), 197-204.

_____. *Culture-Centered Counselling Interventions: Striving for Accuracy*. London: SAGE Publications, 1997.

Pedersen, P. and A. Ivey. *Culture-Centered Counseling and Interviewing Skills*. Westport: Praeger Publishers, 1993.

Perls, F. *Gestalt Therapy Verbatim*. New York: Bantam Books, 1969a.

_____. *In and Out the Garbage Pail*. Real People Press, 1969b.

_____. *The Gestalt Approach and Eye Witness to Therapy*. New York: Bantam Books, 1976.

Piaget, J. *The Growth of Logical Thinking from Childhood to Adolescence*. New York: Basic Books, 1958.

_____. *The Moral Judgment of the Child*. New York: The Free Press, 1965

Pietrofesa, J., A. Hoffman and H. H. Splete. *Counselling: An Introduction*. Boston: Houghton Mifflin Co. 1984.

Ponterotto, J. G. Charting a Course for Research in Multicultural Counseling Training. *The Counseling Psychologist* 26 (January 1998), 43-68.

Ponterotto, J. G., J M. Casa, L. A. Suzuki and C. M. Alexander, eds. *Handbook of Multicultural Counselling*. London: SAGE Publications, 1995.

Pope, K. S. and M. J. T. Vasquez. *Ethics in Psychotherapy and Counselling: A Practical Guide for Psychoanalysis*. San Francisco: Jossey-Bass Publishers, 1991.

Punch, M. Politics and Ethics in Qualitative Research. *Handbbok of Qualitative Research,* eds. N. K. Denzin and Y. S. Lincoln, 83-97. London: SAGE Publications, 1994.

Rasing, W. C. E. The Case of Kolitalik: On the Encounter of *Iglulingmiut* Culture and Canadian Justice. *Continuity and Discontinuity in Arctic Cultures*, ed. C. Buijs, 91-107. Leiden: Centre of Non-Western Studies, 1993.

_____. *Too Many People: Order and Nonconformity in Iglulingmiut Social Process*. Nijmegen: Katholieke Universiteit, 1994.

Rasmussen, K. Report of the Fifth Thule Expedition 1921-1924. Copenhagen, 1931.

Reason, P. and J. Rowan. *Human Inquiry: A Sourcebook of New Paradigm Research*. Toronto: John Wiley & Sons, 1997.

Rennie, D. L. Client's Deference in Psychotherapy. *Journal of Counselling Therapy* 41 (1994), 427-437.

_____. *Person-Centred Counselling: An Experiential Approach*. London: SAGE Publications. 1998.

Rennie, D. L., J. R. Phillips and G. K. Quartaro. Grounded Theory: A Promising Approach to Conceptualization in Psychology? *Canadian Psychology* 29: 2 (1988), 139-150.

Ridley, C. R. *Overcoming Unintentional Racism in Counseling and Therapy: A Practitioner's Guide to Intentional Intervention*. Multicultural Aspects of Counselling Series 5, ed. P. Pedersen. London: SAGE Publications, 1995.

Ridley, C. R., D. W. Mendoza, B. E. Kanitz, L. Angermeier and R. Zenk. Cultural Sensitivity in Multicultural Counseling: A Perceptual Schema Model. *Journal of Counseling Psychology* 41 (1994), 125-16.

Rigazio-DiGilio, S. A. and A. E. Ivey. Individual and Family Issues in Intercultural Therapy: A Culturally Centred Perspective. In *Canadian Journal of Counselling* 29:3 (July 1995), 244-261.

Rogers, C. R. *Counseling and Psychotherapy*. Cambridge, MA: Houghton Mifflin, 1942.

_____. *Client-Centered Therapy*. London: Constable and Company Limited, 1998.

Rohner, R. P. Toward a Conception of Culture for Cross-Cultural Psychology. *Journal of Cross-Cultural Psychology* 15 (June 1984), 111-138.

Rouland, N. Legal Sanctions Among Some Inuit Populations: Theoretical Problems and Ways of Intervening for the Community in the Process of Settling Disputes. *Etudes/Inuit/Studies* 3 (supplement), 1976.

Rowan, J. A Personal View: Concerns About Research. *Counselling Psychology Review* 14 (February 1999), 28-30.

Sahlins, M. *How Natives Think.* Chicago: University of Chicago Press, 1995.

Sampath, H. M. Modernity, social structure, and mental health of Eskimos in the Canadian eastern arctic. *Proceedings of the 3rd International Congress on Circumpolar Health,* 479-489. University of Toronto Press, 1974.

_____. Inuit Depression in Cross Cultural Perspective. *Proceedings of the 5th International Congress on Circumpolar Health*, 519-521. University of Toronto Press, 1981.

Samuda, R. J. and A. Wolfgang, eds. *Intercultural Counseling and Assessment: Global Perspectives*. Toronto: C. J. Hogrefe, Inc., 1985.

Satir, V. *Peoplemaking*. Palo Alto, CA: Science and Behavior Books, Inc., 1972.

_____. *Conjoint Family Therapy*. 3rd ed. Palo Alto, CA: Science and Behavior Books, 1983.

Saunders, C. Berg, de Shazer and Friends: An American Training Experience. *Counselling* (May 1995), 128-130.

_____. Solution-Focused Therapy in Practice: A Personal Experience. *Counselling* (November 1996), 312-315.

Schaefer, O. and M. Metayer. Mental Health and Culture Change: Eskimo personality and society – yesterday and today. *Proceedings of the 3rd International Congress on Circumpolar Health*, 469-479. University of Toronto Press, 1974.

Schwandt, T. A. Constructivist, Interpretivist Approaches to Human Inquiry. *Handbook of Qualitative Research*, eds. N.K. Denzin and Y. S. Lincoln, 118-137. London: SAGE Publications, 1994.

Scissons, E. H. *Counseling for Results: Principles and Practices of Helping.* Pacific Grove, CA: Brooks/Cole Publishing Company, 1993.

Scupin, R. *Cultural Anthropology: A Global Perspective*. 2nd ed. Englewood Cliffs, NJ: Prentice Hall, 1995.

Scupin, R. and Decorse, C. R. *Anthropology: A Global Perspective*. Englewood Cliffs, NJ: Prentice Hall, 1995.

Seale, C. *The Quality of Qualitative Research*. London: SAGE Publications, 1999.

Segall, M. H. More Than We Need to Know About Culture But Were Afraid Not to Ask. *Journal of Cross-Cultural Psychology* 15 (June 1984), 153-162.

Seidman, I. E. *Interviewing as Qualitative Research: A Guide for Researchers and the Social Sciences*. New York: Teachers College Press, 1991.

Shafi, S. A Study of Muslim Asian Women's Experiences of Counselling and the Necessity for a Racially Similar Counsellor. *The Counselling Psychology Quarterly* 11 (1998), 301-314.

Shebib, B. *Counselling Skills for Social Service Workers*. Burnaby, BC: Ministry of Skills, Labour and Training, 1994.

Shweder, R. *Thinking Through Cultures: Expeditions in Cultural Psychology*. Cambridge, MA: Harvard University Press, 1991.

Skinner, B. F. *About Behaviorism*. New York: Vintage Books, 1974.

Sodowsky, G.R., R. C. Taffe, T. B. Gutkin and S. L. Wise. Development of the Multicultural Counseling Inventory: A Self-Report Measure of Multicultural Competencies. *Journal of Counseling Psychology* 41 (1994), 137-148.

Solso, R. L. *Cognitive Psychology*. Toronto: Allyn and Bacon, Inc., 1988.

Spalding, A. with help from T. Kusugaq. *Inuktitut: A Multi-Dialectal Outline Dictionary*. Iqaluit, NU: Nortext and Nunavut Arctic College, 1998.

Speight, S. L., L. J. Myers, C. I. Cox and P. S. Highlen. A Redefinition of Multicultural Counselling. *Journal of Counselling and Development* 70 (September/October 1991), 29-36.

Spencer, M. *Foundations of Modern Sociology*. 5th ed. Toronto: Prentice-Hall Canada, 1990.

Steenbarger, B. N. A multicontextual model of counselling: bridging brevity and diversity. *Journal of Counselling and Development* 72 (1993), 8-15.

Stout, M. D. and Kipling, G. D. Emerging Priorities for the Health of First Nations and Inuit Children and Youth. Draft discussion paper. Ottawa: Health Canada, 1999.

Strauss, A. and J. Corbin. *Basics of Qualitative Research: Grounded Theory Procedures and Techniques*. London: SAGE Publications, 1990.

_____. Grounded Theory Methodology: An Overview. *Handbook of Qualitative Research,* eds. N .K. Denzin and Y. S. Lincoln, 273-285. London: SAGE Publications, 1994.

_____. Grounded Theory Methodology. *Strategies of Qualitative Inquiry*, eds. N. K. Denzin and Y. S. Lincoln, 158-183. London: SAGE Publications, 1998.

Sue, D. W. Multicultural Counseling: Models, Methods, and Actions. *The Counseling Psychologist* 24 (April 1996), 279-284.

Sue, D. W. and D. Sue. *Counseling the Culturally Different: Theory and Practice*. 2nd ed. Toronto: John Wiley & Sons, Inc., 1990.

Talman, M. *Single Session Therapy*. San Francisco: Jossey-Bass, 1990.

Taylor, Charles. The Politics of Recognition. *Multiculturalism,* ed. A. Gutmann, 25-73. Princeton: Princeton University Press, 1994.

Tester, F. J. Integrating the Inuit: Social Work Practice in the Eastern Arctic, 1955-1962. *Northern Parallels: 4th Circumpolar Universities Cooperation Conference*, eds. S. McLarnon and D. Nord, 342-356. Prince George: University of Northern British Columbia, 1995.

Thompson, N. *Promoting Equality: Challenging Discrimination and Oppression in the Human Services*. London: MacMillan Press Ltd., 1998.

Thorne, B. *Person-Centred Counselling: Therapeutic and Spiritual Dimensions*. London: Whurr, 1998.

Tomlinson, J. *Cultural Imperialism: A Critical Introduction*. London: Pinter, 1997.

Trevino, J. G. Worldview and Change in Cross-Cultural Counseling. *The Counseling Psychologist* 24 (1996), 198-215.

Truax, C. B. and R. R. Carkhuff. *Toward Effective Counselling and Psychotherapy*. Chicago: Aldine, 1967.

Tulloch, S. ed. *The Oxford Dictionary and Thesaurus*. Oxford: Oxford University Press, 1997.

Tylor, E. B. Primitive Culture: Researches into the Development of Mythology, Philosophy, Religion, Art, and Custom: 1871; reprint, Gloucester, MA: Smith, 1958.

Vacc, N. A., S. B. De Vaney and J. Wittmer. *Experiencing and Counselling Multicultural and Diverse Populations*. Bristol, PA: Accelerated Development, 1995.

Van den Steenhoven, G. Study of the Legal Concepts Among the Eskimos in Some Parts of the Keewatin District, NWT: Report to the Department of Northern Affairs and National Resources. The Hague, 1955.

Verma, G. K. Intercultural Counselling: A British Perspective. *Intercultural Counselling and Assessment: Global Perspectives*, eds. R. J. Samuda and A. Wolfgang, 83-95. Toronto: C. J. Hogrefe, 1984.

Vontress, C. E. Theories of Counselling: A Comparative Analysis. *Intercultural Counselling and Assessment: Global Perspectives*, eds. R. J. Samuda and A.Wolfgang, 19-31. Toronto: C. J. Hogrefe, 1984.

Wavell, S. This Land is Our Land. *Sunday Times Magazine* (London), 28 March 1999, 40-48.

Wehrly, B. *Pathways to Multicultural Counseling Competence: A Developmental Journey*. Pacific Grove, CA: Brooks/Cole Publishing Company, 1995.

Weinrach, S. G. and K. R. Thomas. The Counselling Profession`s Commitment to Diversity-Sensitive Counseling: A Critical Reassessment. *Journal of Counselling and Development*. 74 (May/June 1996), 472-476.

_____. Diversity-Sensitive Counselling Today: A Postmodern Clash of Values. *Journal of Counseling and Development* 76 (Spring 1998), 115-121.

Whorf, B. L. *Language, Thought and Reality: Selected Writings of Benjamin Lee Whorf*. J.B. Carrol, ed. New York: John Wiley and Sons, 1956.

Wierzbicka, A. *Semantics, Culture, and Cognition: Universal Human Concepts in Culture-Specific Configurations*. Oxford: Oxford University Press, 1992.

Wilson, E.O. *Consilience: The Unity of Knowledge*. New York: Vintage Books, 1999.

Wolfgang, A. Intercultural Counselling and Non-Verbal Behaviour. *Intercultural Counselling and Assessment: Global Perspectives*. eds. R. J. Samuda and A.Wolfgang, 33-47. Toronto: C. J. Hogrefe, 1984.

Wolpe, J. *Psychotherapy by Reciprocal Inhibition.* Stanford, CA: Stanford University Press, 1958.

_____. *The Practice of Behavior Therapy*. 3rd ed. Elmsford, NY: Pergamon, 1982.

World Health Organization Working Group on Problems of Family Health in Circumpolar Regions. Problems of Family Health in Circumpolar Regions. *Arctic Medical Research* 40 (1985), 7-20.

Wright, M. Being There: Applying Rogerian Concepts in the Classroom. In *From Strength to Strength: Social Work Education and Aboriginal People,* eds. K. Feehan and D. Hannis, 57-63. Edmonton, AB: Grant McEwan Community College, 1993.

Wurzel, J. S. *Toward Multiculturalism: A Reader in Multicultural Education.* Yarmouth, Maine: Intercultural Press Inc., 1988.

Yalom, I. D. *Love's Executioner and Other Tales of Psychotherapy*. London: Bloomsbury, 1989.

Zapf, K. Educating Social Work Practitioners for the North: A Challenge for Conventional Models and Structures. *The Northern Review* 7, 35-52.

Zastrow, C. *The Practice of Social Work.* 5th ed. Pacific Grove, CA: Brooks/Cole Publishing Company. 1995.

Elders' Interviews: Series Title: *Interviewing Inuit Elders*

Aupilaarjuk, M., T. Aupilaarjuk, L. Nutaraaluk, R. Iqallijuq, J. Ujarak, I. Ijituuq and M. Kupaaq. *Cosmology and Shamanism*, ed. B. Saladin d`Anglure. Iqaluit: Nunavut Arctic College, 2001.

Aupilaarjuk, M., M. Tulimaaq, A. Joamie, E. Imaruittuq, L. Nutaraaluk. *Perspectives on Traditional Law*, eds. J. Oosten, F. Laugrand and W. Rasing. Iqaluit: Nunavut Arctic College, 1999.

Ekho, N. and U. Ottokie. *Childrearing Practices*, ed. J. Briggs. Iqaluit: Nunavut Arctic College, 2000.

Nakasuk, S., H. Paniaq, E. Ootoova, and P. Angmaalik. *Introduction,* eds. J. Oosten and F. Laugrand. Iqaluit: Nunavut Arctic College, 1999.

Ootoova, I., T. Q. Atagutsiak, T. Ijjangiaq, J. Pitseolak, A. Joamie, A. Joamie, and M. Papatsie. *Perspectives on Traditional Health*, eds. M. Therrien and F. Laugrand. Iqaluit: Nunavut Arctic College, 2001.

Tungilik, V. and R. Uyarasuk. *Inuit Perspectives on the Twentieth Century: The Transition to Christianity*, eds. J. Oosten and F. Laugrand. Iqaluit: Nunavut Arctic College, 1999.