STARTING PLACE STORY TOOLKIT MANUAL

SPS Framework, Process, and Tools for
Indigenous Communities’ Self-Determined Journey to Wellness

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ACKNOWLEDGEMENTS

We acknowledge the deep work we have done in collaboration with Indigenous communities across Turtle Island, also known as Canada. Through our learning together, we are all coming to understand the pathways we walk to our landing place of wellness. The Canadian Red Cross (CRC) is piloting a community-change model in Indigenous communities to create safe environments and prevent violence. Community and individuals’ stories inform this model, and, in turn, the model has guided our development of this Starting Place Story Framework, Process, and Tools (SPS).

We developed the SPS to help communities gather their story threads that had been scattered through the impacts of colonization. Through the extended process of gathering these story threads from many community members, the Community Coordinators can begin to place them in three frames – the Cycle of Violence, Circle of Wellness, and Relational Determinants of Health. As the number of threads in the frames accumulate, they are woven together and recover the communities’ stories. On their self-determined journey to wellness, it is community members shared stories and their weaving together into the community SPS that enables communities to move along their pathways of healing to restoring their Relational Determinants of Health.

We are grateful for the contributions of Kathy Absolon and Susan Dion to a preliminary starting point story, as well as Angela Salamanca. We are grateful to Naomi Andrews and the Building Connection team¹ for developing Your Starting Point Story as a tool to guide interpersonal violence prevention programming within Indigenous and non-Indigenous communities. Finally, we acknowledge the many community partners we have had over the last eight years who contributed so deeply to our understanding and the development of the Starting Place Story Framework, Process, and Tools as a self-determination tool.

Welcome to the Manual for Writing your Community’s Starting Place Story

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Describes the SPS and explains what a Starting Place Story is, why we create one, who is involved, how it is created, and the end result.

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SPS TOOLS – The following tools are provided by the Canadian Red Cross on a USB key.

SECTION FIVE – SPS HANDOUTS AND TEMPLATE

HANDOUTS FOR WORKING WITH COMMUNITY MEMBERS
In SECTION ONE – Learning about the Community Journey of Change
• Figure 1. Map of Community’s Movement along its Pathways of Healing to Restoring its Relational Determinants of Health
• Figure 2. Cycle of Violence Impacts & Circle of Wellness Landing Place
• Figure 3. Community’s Relational Determinants of Health Targets for Community Action Plan

In SECTION THREE – Preparation & Questions for Conversations with Community Members
• One Page Starting Place Story Description – attach to email invitation and bring to conversation
• SPS Knowledge Gathering Consent Form
• SPS Knowledge Gathering Recording Pages: Physical; Mental; Emotional; Spiritual; and Relational Determinants of Health
• SPS Knowledge Gathering Question Sheets: Physical; Mental; Emotional; Spiritual; and Relational Determinants of Health

TEMPLATE FOR DEVELOPING THE SPS
In SECTION FOUR – Writing Your Community’s Starting Place Story
• Starting Place Story Template

We hope this tool helps your community and the Canadian Red Cross in working together to create safe environments for children and youth.
SPS FRAMEWORK

SECTION ONE – Learning about the Community Journey of Change

An understanding of Indigenous health is that it is made up of the physical, mental, emotional, and spiritual wellbeing of the whole community, whether urban, rural, or remote. Indigenous community health relies on foundational relationships with land, culture, ceremony, and language that contribute to wellness. We understand these as relational determinants of health.

Community Journey of Change
The Community Journey of Change is a process that Indigenous communities can use to help understand historical and ongoing harms are the foundation for current experiences of violence within the community. The process helps communities address the resulting challenges of this violence. The community comes to understand, name, and re-claim its past and begin its self-determined journey to wellness, moving along its pathways of healing from the Cycle of Violence to the Circle of Wellness and restoring its Relational Determinants of Health for the community, families, and individuals.2

The Canadian Red Cross supports Indigenous communities in identifying their cultural knowledge and practices and creating healing processes in their own community that address the cycle of violence rooted in colonization and promote the circle of wellness rooted in Indigenous traditions.

The four interconnected elements in the Community Journey of Change model are the: Canoe; Cycle of Violence; Circle of Wellness; and, Relational Determinants of Health.

Canoe
The canoe is the central element in the model. In the following Figures 1, 2 and 3, the canoe represents everyone within the community working together to create safety for children and youth: multiple sectors in the community, the community’s Violence Prevention Team, a Violence Prevention Team Coordinator, and the Canadian Red Cross or other organizations partnering with the Community for violence prevention and wellness. Movement of the canoe from the Cycle of Violence to the Circle of Wellness happens by everyone working together. Yet the community knowledge and practices drawn on to recover the fundamentals of wellness in the-Circle of Wellness landing place and the Relational Determinants of Health to be restored are self-determined and led by the community and its members.


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Figure 1. A Map of Community’s Movement along its Pathways of Healing to Restoring its Relational Determinants of Health
Cycle of Violence
In Figure 2, the Cycle of Violence shows the layers of harm, which include disruptive experiences such as contact, stolen resources, slavery/missing people, dislocation, disease, substances, residential schools, confederation, the Indian Act and Aboriginal policies, police and criminal justice, medical research in Indian hospitals, and the sixties and millennial scoops.

In the Cycle of Violence, the harms are distributed among the physical, mental, emotional, and spiritual quadrants by assigning them to the quadrant of their most prominent disruption. It is recognized, however, that each harm can fit into each quadrant and its effects can be felt across all the quadrants.

Circle of Wellness
If colonization has disrupted “all my relations”, then wellness can be understood as a restoration of “all my relations”. In Figure 2, the Circle of Wellness highlights three fundamentals of wellness in each quadrant to keep in mind when considering which cultural knowledge and practices would be used to recover community’s wellness vision restoring “all my relations” for the community.

In this way, the Circle of Wellness helps communities envision their landing place for wellness and guides them to think about such questions as:

- What are our common goals for wellness?
- Where do we come together to work on a common vision?
- What are our priorities in restoring wellness within our community?

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3 “... the phrase ‘all my relations’ ... points to the truth that we are related, that we are all connected, that we all belong to each other. The most important word is ‘all’. Not just those who look like me, sing like me, dance like me, speak like me, pray like me or behave like me. ALL my relations. That means every person, just as it means every rock, mineral, blade of grass, and creature. We live because everything else does. If we were to choose collectively to live that teaching, the energy of our change of consciousness would heal each of us – and heal the planet.” Richard Wagamese, Embers: One Ojibway’s Meditations. (2016): 36.
**Figure 2. Cycle of Violence Impacts and Circle of Wellness Landing Place**

**CYCLE OF VIOLENCE**

- Physical
  - Indian Act & Aboriginal Policy
  - Residential schools
  - Police & criminal justice
- Mental
  - Residential schools
  - 60's scoop & Millenium scoop
  - Rise of gangs
- Emotional
  - Substances
- Spiritual
  - Slavery / missing people
  - Spiritual dislocation
  - Introduction of Christianity
  - Residential schools

**CIRCLE OF WELLNESS**

- Physical
  - Healthy land, water, air and living environment
  - Relationship with and access to the land, traditional foods and medicines
  - Physical and social safety
- Mental
  - Grounded in traditional ways of knowing, being and doing
  - Self-determination
  - Self and community responsibility and accountability
- Emotional
  - Reconnection to all my relations and creator
  - Living cultural and individual gifts
  - Resilience and resistance
- Spiritual
  - Healthy stable and harmonious relationships
  - Support during difficult experiences to build resilience
  - Belonging and connectedness in family and community

**Colonization’s* Disruptive Experiences**

*Colonization on Turtle Island* – The illegal occupation of unceded territories, forcible removal of children from families, punishment for speaking native language. Carried out with the deliberate intent to destroy Indigenous Peoples’ cultural knowledge and practices.

**Community’s Fundamentals of Wellness**

Where Community’s Cultural Knowledge* and Practices are used to recover/revitalize Community’s Wellness Vision.

Where “All My Relations” are restored.

*Includes traditional and contemporary Indigenous Knowledge (Kovach, 2021)
Relational Determinants of Health
Once we start to understand the layers of harm and begin gathering our community-specific cultural knowledge and practices for wellness, it becomes possible to consider the actions that restore community’s foundational relationships with land, culture, ceremony, and language contributing to wellbeing of the whole community.

Figure 3 features Relational Determinants of Health targets in the physical, mental, emotional, and spiritual quadrants for community action planning. These actions form the foundation of the community’s work for creating pathways of healing to repair community’s systems that lead to its wellness landing place. It is important for community members to see and share a collective vision of a landing place for wellness. The actions on these pathways and the wellness landing place are determined and led by the community and its members.
Figure 3. Community’s Relational Determinants of Health Targets for Community Action Planning

Colonization’s Impacts of Harm (Identified during SPS Process)

Community’s Relational Determinants of Health Targets (Initial Community Action Plan Priorities Identified during SPS Process)

Used in Community Action Planning to Repair Community’s Systems and Restore “All My Relations”

RELATIONAL DETERMINANTS OF HEALTH
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SECTION TWO – Starting Place Story as a Community Self-Determination Tool

**WHAT is a Starting Place Story?**
It is the beginning of a collaborative community journey of change with our community and the Canadian Red Cross to help create safety and wellness for children, youth, families, and elders in our community.

It is our community’s self-determination tool that provides a starting place to understand the:
- **historical and ongoing harms** in our community caused by colonization
- **cultural knowledge and practices** our community can use for its wellness landing place vision
- **actions** our community can take to repair the community systems that restore “all my relations”

**WHAT are the Benefits of a Starting Place Story?**
Creating a Starting Place Story supports your community in building awareness of its strengths, weaknesses, and where there might be gaps in policies, programs, and services for creating community safety and wellness.

Your community’s Story also informs the Canadian Red Cross’ understanding about the recent history in your community, your community’s current challenges, and your community’s starting place for violence prevention and wellness. Knowing your community’s starting place helps your community and the Canadian Red Cross work together to address your community’s areas of vulnerability and build on your community’s strengths.

**WHO is Involved in Writing the Starting Place Story?**
The Canadian Red Cross Community Coordinator and members of your community involved in preventing violence and building safety for children, youth, families, and elders in your community.

**HOW is the Starting Place Story Written?**
The Community Coordinator and individual community members meet. The Community Coordinator asks questions, gathers community member’s story threads of knowledge, then brings everyone’s knowledge together to build your community’s Starting Place Story.

The Starting Place Story then provides a strong starting place, informed by community knowledge, for the community to begin moving along its pathways of healing to restore its relational determinants of health, All My Relations.
EXAMPLES of Questions that help Draw Out Story Threads
What works well? How does community come together in times of crisis? Who are the knowledge holders? How is culture integrated, or not integrated, into the systems in the community?

AN IMPORTANT CONSIDERATION: when working with stories where we are listening to suffering across the generations, we, and the people who are sharing knowledge with us, may need to connect with someone for support. When working on the Starting Place Story, it is important to have resources in the community with their contact information available for yourself as well as the community members you sit and talk with.

WHAT is the Goal, WHAT is the End Result?
A living document that demonstrates our pathways of healing to community wellness by:

• recognizing our community’s historical and ongoing harms and their impacts in the physical, mental, emotional, and spiritual quadrants that have led to a Cycle of Violence;
• envisioning our community’s wellness landing place in the physical, mental, emotional, and spiritual quadrants by using our community knowledge and practices to create a Circle of Wellness; and,
• determining our community’s actions in the physical, mental, emotional, and spiritual quadrants that repair community systems and restore our foundational relationships with land, culture, ceremony, and language that are our Relational Determinants of Health.

The Starting Place Story Is:
• a living document that can be added to and revised
• a guide for prevention planning
• the beginning of a journey of change to restoring community wellness.
SPS PROCESS

SECTION THREE – Preparations & Questions for Conversations with Community Members

GETTING READY FOR THE CONVERSATION

1. **Make** a list of people in your community involved in violence prevention and creating safety. **Email** them an invitation to meet and share **knowledge** with you for your community’s Starting Place Story. Working with the SPS questions prepares them to learn about the Community Journey of Change model used in the CRC’s Walking the Prevention Pathway violence prevention programming. **Attach** the one-page description of the Starting Place Story on the USB to your email invitation for them to read.

2. For each community member you meet with, **from the USB print** a colour copy of the Figures and a black and white copy of the SPS one-page description and **Consent Form**:

   **SECTION ONE**
   - **Figure 1.** A Map of Community’s Movement along its Pathways of Healing to Restoring its Relational Determinants of Health
   - **Figure 2.** Cycle of Violence Impacts & Circle of Wellness Landing Place
   - **Figure 3.** Community’s Relational Determinants of Health Targets for Community Action Planning

**SECTION THREE**
- Starting Place Story one-page description
- SPS Knowledge Gathering Consent Form

**Bring** these copies to your conversation with the community member. At the end of the conversation the community member can keep them.

**Suggestions for SPS Knowledge Gathering Recording Pages and Question Sheets**

**SPS Recording Pages**
You can use the Knowledge Gathering Recording Pages to help you make note of community member’s answers to your questions. Later, you will use these answers to put together your community’s Starting Place Story.

**Before your conversation with community members:**

I) If you would like to record community members’ answers by hand
   - **Print** a Recording Page package from the USB for each community member you meet, **writing their name at the top of each Page**
   - **Bring** the Recording Page package with you to your conversation with the community member

II) If you would prefer to type community members’ answers
• Make a Starting Place Story folder on your computer in your Documents. In that folder, make a sub-folder for each community member you will meet with. Open each Recording Page on the USB and do a Save As of each page into the sub-folder for each community member. When you are with the community member, open their sub-folder and let them know you will type, rather than hand-write, notes of your conversation together. Explain to them this will help you accurately represent their knowledge in the SPS.

**SPS Question Sheets**

Print two (2) sets of SPS Knowledge Gathering Question Sheets from the USB to use at each conversation – one set for you and one set for the community member. On your set at the top of each SPS Question Sheet write the community member’s first and last name. When talking with the community member, you or the community member may decide to change a question, skip a question, and or add a different question. You will need to record the changed, skipped, and or added question on their corresponding SPS Question Sheet.

**AT THE BEGINNING OF THE CONVERSATION**

Place Figure 1 on the table.

1st, explain it represents the Community Journey of Change model and process outlined in the upcoming CRC’s Walking the Prevention Pathway programming. Briefly explain the four elements of the model:

- **Canoe** – represents everyone working together - the community, the community’s prevention team, the Community Based Coordinator, and the Canadian Red Cross – to create safety for youth and children in the community.
- **Cycle of Violence** – the layers of historical and ongoing harms from colonization across the physical, mental, emotional, and spiritual quadrants
- **Circle of Wellness** – based on their community’s cultural knowledge and practices is a collective vision of the community’s landing place for wellness
- **Relational Determinants of Health** – actions determined and led by community that support community moving from the Cycle of Violence to the Circle of Wellness

2nd, explain what the Starting Place Story process is – a community self-determination tool to increase community’s awareness of its strengths, challenges, and gaps. Following the information on the one-page SPS handout, explain why an SPS is created, who is involved, how it is created, and that the end result – the community’s story - brings community to the beginning of its community journey of change.

3rd, after you have explained what the Starting Place Story is to the community member, ask them if they would like to participate in sharing their knowledge for it. If they would, read through the Consent form with the community member. Fill out their copy and yours. Give them their copy to keep. If they are not sure they want to have their knowledge shared in the SPS, go ahead and start asking the questions so they can see what they are like. They can stop any time they want, or finish answering all the questions. After answering the questions, if they decide they don’t what the knowledge they shared used, that is completely ok. Destroy any notes that you made and if you made a recording, erase it.
THE QUESTION PORTION OF THE CONVERSATION

- **Ask** the same SPS Knowledge Gathering Questions in the same order for each community member. This is important. Doing it this way will help you when it comes time to put your community’s story together.
- **Record** community members’ answers on the SPS Knowledge Gathering Recording Pages, either by hand or by typing:
  - 1st - asking the questions for Physical Quadrant Knowledge
    - First, ask the Cycle of Violence questions related to the past for community
    - Then, ask the Circle of Wellness questions related to their vision for community’s wellness in the future
  - 2nd - ask the questions for the Mental Quadrant Knowledge
    - First, ask the Cycle of Violence questions related to the past for community
    - Then, ask the Circle of Wellness questions related to their vision for community’s wellness in the future
  - 3rd - ask the questions for the Emotional Quadrant Knowledge
    - First, ask the Cycle of Violence questions related to the past for community
    - Then, ask the Circle of Wellness questions related to their vision for community’s wellness in the future
  - 4th - ask the questions for the Spiritual Quadrant Knowledge
    - First, ask the Cycle of Violence questions related to the past for community
    - Then, ask the Circle of Wellness questions related to their vision for community’s wellness in the future
  - 5th - ask the questions for the Relational Determinants of Health Community Systems Knowledge

CLOSING THE CONVERSATION

After all the questions have been answered thank the community member for their time. Explain that you will put everyone’s answers together to build your community’s Starting Place Story and when it is compiled you will send it to them for their review and feedback.

AFTER EACH CONVERSATION

If you recorded community members’ answers by hand, put each community member’s Recording Pages into a separate file folder. If you typed community member’s answers, make sure you SAVE each Recording Page before closing it. If you and the community member changed or left out one of the SPS Questions, or added a new SPS question, mark the corresponding SPS Question Sheet accordingly and place it into physical file folder with the community member’s name on it.
NAME & POSITION - ________________________________________________________________

1st - PHYSICAL QUADRANT KNOWLEDGE RECORDING PAGE - Cycle of Violence (impacts of historical harms)
NAME & POSITION - 

1st - PHYSICAL QUADRANT KNOWLEDGE RECORDING PAGE - Circle of Wellness (landing place of wellness)
NAME & POSITION - ____________________________________________________________________________

2nd – MENTAL QUADRANT KNOWLEDGE RECORDING PAGE - Cycle of Violence (impacts of historical harms)
NAME & POSITION - ____________________________

2nd – MENTAL QUADRANT KNOWLEDGE RECORDING PAGE - Circle of Wellness (landing place of wellness)
NAME & POSITION - 

3rd - EMOTIONAL QUADRANT KNOWLEDGE RECORDING PAGE - Cycle of Violence (impacts of historical harms)
NAME & POSITION - ____________________________________________________________

3rd - EMOTIONAL QUADRANT KNOWLEDGE RECORDING PAGE - Circle of Wellness (landing place of wellness)
NAME & POSITION - __________________________________________________________________________________________________________________________

4th - SPIRITUAL QUADRANT KNOWLEDGE RECORDING PAGE - Cycle of Violence (impacts of historical harms)
NAME & POSITION - 

4th - SPIRITUAL QUADRANT KNOWLEDGE RECORDING PAGE - Circle of Wellness (landing place of wellness)
NAME & POSITION - 

5th – RELATIONAL DETERMINANTS OF HEALTH COMMUNITY SYSTEMS KNOWLEDGE RECORDING PAGE
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<td><strong>Circle of Wellness - landing place</strong></td>
</tr>
<tr>
<td><strong>Cycle of Violence – impacts of historical harms</strong></td>
<td><strong>Impacts of Harms Knowledge</strong></td>
</tr>
<tr>
<td>1. When did Europeans first come to our territory? Why were they in our territory? For example, exploration or fur trade.</td>
<td>1. Within our community, would it be common to spend time on the land?</td>
</tr>
<tr>
<td>2. After Europeans were in our territory, were there new diseases? If yes, what were they?</td>
<td>2. What would the community be doing to take care of our renewable resources such as land, water, air – this includes animals, fish, fowl, and traditional medicines?</td>
</tr>
<tr>
<td>3. What changes to harvesting happened after contact? For example, with trapping, hunting, furs, harvesting plants, fishing, fish camps, trap lines, cabin areas, as well as traditional burial areas.</td>
<td>3. What traditional foods would our community trap, hunt, harvest &amp; fish?</td>
</tr>
<tr>
<td>4. How were family living arrangements affected during and after contact?</td>
<td>4. Would there be traditional healers in our community?</td>
</tr>
<tr>
<td>5. Has our community experienced relocation since Europeans arrived on our territory?</td>
<td>5. How would people get affordable housing that is safe and accommodates the needs of families, single people &amp; single parent families?</td>
</tr>
<tr>
<td>6. After Europeans arrived on our territory, did our community sign any agreements, treaty or otherwise, with the Crown?</td>
<td>6. What land-based cultural programs and language would be offered?</td>
</tr>
<tr>
<td>7. a) What Indian Residential Schools were the children of [community name] sent to? b) Was there an Indian Day School in [community name]?</td>
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</tr>
<tr>
<td>8. a) Was there an Indian Hospital close to [community name]? b) Was there a TB Sanitorium community members were sent to?</td>
<td></td>
</tr>
<tr>
<td>9. After *colonization, do we still live on our territory? If we do, have there been changes to how we move around on our territory? *colonization - the actions of forcibly taking our land, taking our children from our community, forcing us to change our language and change our lifestyle practices</td>
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## SPS QUESTIONS – Community’s Mental Quadrant Knowledge

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<th>Cycle of Violence – impacts of historical harms</th>
<th>Circle of Wellness - landing place</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Historically, which ways did the Indian Act affect our community?</td>
<td>1. What are the healthy lifestyle practices community members would participate in?</td>
</tr>
<tr>
<td>2. How did our traditional way of life change after accommodating federal government rules, regulations, and the reservation system?</td>
<td>2. What cultural knowledge and practices would help maintain peace and harmony within our community?</td>
</tr>
<tr>
<td>3. How were our traditional *governance structures impacted? *governance – the processes of governing the community and the Nation</td>
<td>3. Which programs and events would help children, youth, and elders be strong in their [Cree] identity?</td>
</tr>
<tr>
<td>4. What is our community’s relationship with the RCMP and or provincial police?</td>
<td>4. What would healthy leadership in our community look like?</td>
</tr>
<tr>
<td></td>
<td>5. How would our [community/nation] education system continue to support our children, youth and elders?</td>
</tr>
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**IMPACTS OF HARMS KNOWLEDGE**

**VISION OF COMMUNITY WELLNESS KNOWLEDGE**
# SPS QUESTIONS – Community’s Emotional Quadrant Knowledge

## 3rd - EMOTIONAL

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<th>Circle of Wellness - landing place</th>
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<tbody>
<tr>
<td>1. Has there been, or are there, gangs in our community? If there are no gangs in our community currently, do community members have connections with gangs outside our community?</td>
<td>1. Are local community members teachers in the schools?</td>
</tr>
<tr>
<td>2. In the past, were children and youth removed from our community? Is this still happening today?</td>
<td>2. What are examples of the way’s community would keep youth engaged?</td>
</tr>
<tr>
<td>3. Do families in our community have experience with the <em>60’s scoop?</em> <em>Provincial child services removing children from community and placing them for adoption with non-Indigenous families</em></td>
<td>What activities &amp; programs would you see that build a sense of cultural pride and belonging for our children, youth, adults, and elders?</td>
</tr>
<tr>
<td>4. How does alcohol and <em>substance use show up in our community?</em> <em>substance use - includes both non-prescription and prescription drugs, as well as nicotine (cigarettes, snuff, vaping)</em></td>
<td>3. (a) What are some ways people and families would get support during difficult experiences? (b) Are there different agencies offering different services?</td>
</tr>
<tr>
<td>5. In what ways does gambling affect families and our community?</td>
<td>4. What would extended families do to build connection, strength, resilience, and belonging?</td>
</tr>
<tr>
<td>6. Were there social impacts in the community during development? For example, Hudson Bay trading post traders &amp; missionaries, and more recently miners &amp; government workers.</td>
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<tr>
<td>7. Was there ever a time or incident in our community’s history that you feel needs to be highlighted?</td>
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## IMPACTS OF HARS KNOWLEDGE

## VISION OF COMMUNITY WELLNESS KNOWLEDGE
## SPS QUESTIONS – Community’s Spiritual Quadrant Knowledge

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<th>Circle of Wellness - landing place</th>
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<tbody>
<tr>
<td>1. How did the introduction of Christianity - Catholic, Pentecostal, Anglican, and United - change people’s spiritual practices?</td>
<td>1. In what ways would our community demonstrate its strength, resilience, and care for one another?</td>
</tr>
<tr>
<td>2. What were the ways Indian Residential School interrupted our traditional practices?</td>
<td>2. Which [Cree] ceremonies and spiritual practices would families in our community engage in?</td>
</tr>
<tr>
<td>3. How was our [Cree] language impacted in our community?</td>
<td>3. Which religious ceremonies would families in our community engage in?</td>
</tr>
<tr>
<td>4. Besides Indian Residential School, were children adopted or removed from our community? If so, how did that happen?</td>
<td>4. How would children be encouraged to develop their natural strengths?</td>
</tr>
<tr>
<td>5. Are there people, in the past or currently, missing from our community? If so, what are the different ways that happened?</td>
<td>5. What ways would our [Cree] oral tradition and storytelling be used?</td>
</tr>
<tr>
<td></td>
<td>6. Explain the ways people in our community would learn our [Cree] language.</td>
</tr>
<tr>
<td></td>
<td>7. Who would teach children to trap, hunt, harvest plants for food, and gather medicines?</td>
</tr>
</tbody>
</table>

### SPS QUESTIONS – Community’s Systems Knowledge

**NAME:** ______________________________________

<table>
<thead>
<tr>
<th>5th – RELATIONAL DETERMINANTS OF HEALTH Coordinator Copy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.</strong> How does our community include our cultural knowledge and practices in wellness programming; in other words, how do we make the programming meaningful to our community? Answers will vary depending upon whom you talk with and their lived experience. There will be a diversity of voices in the community.</td>
</tr>
<tr>
<td><strong>2.</strong> How do systems in our community work together to create safe and healthy environments? Before your meeting, identify the systems in your community and make note of whether they work together. For example: the judicial system, governance system, health system, education system, child welfare system.</td>
</tr>
<tr>
<td><strong>3.</strong> What prevention and / or preparedness programs exist in our community? Skip this question if a program and services mapping project or booklet has been done in your community and the person you are speaking with have already contributed their community knowledge to this question.</td>
</tr>
<tr>
<td><strong>4.</strong> Has the community worked with the Canadian Red Cross for prevention and / or preparedness? Before your meeting, identify and make note of CRC prevention and preparedness programs/information that already exists in your community, for example, First Aid Training, the Be Safe! kit.</td>
</tr>
</tbody>
</table>
| **5.** When positive change happens in our community how does community support it, what does the community do? Give examples of what your community would consider positive changes. One example is:  
  - **positive change:** language revitalization  
  - **community’s response:** families working to bring [ᓀᐦᐃᔭᐁᐧᐃᐧᐣ/nêhiyawêwin/Cree] back into our community and youth asking for [ᓀᐦᐃᔭᐁᐧᐃᐧᐣ/nêhiyawêwin/Cree] to be taught in school. |
| **6.** When crisis happens in our community, how do we come together and what do we do about the following types of crises:  
  (i) natural disasters or environmental – for example, a fire or flooding;  
  (ii) social – for example, youth suicide or acts of violence, death of an elder resulting in the loss of cultural and community knowledge, bootleggers, gangs, deaths from drug use; and,  
  (iii) global – for example, the COVID-19 pandemic. |
| **7.** One of the things that will be worked on during Walking the Prevention Pathway programming is a Community Action Plan for violence prevention and creating wellness. The Community Action Plan will support safety and wellness in our community. **In your opinion, what are the three priorities our community should focus on in our Community Action Plan?** |
SPS QUESTIONS – Community Systems Knowledge

NAME: ____________________________________________

<table>
<thead>
<tr>
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<tr>
<td>Community Member Copy</td>
</tr>
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</tr>
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<td>2. How do systems in our community work together to create safe and healthy environments?</td>
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<tr>
<td>For example, the judicial system, governance system, health system, education system, child welfare system.</td>
</tr>
<tr>
<td>3. What prevention and / or preparedness programs exist in our community?</td>
</tr>
<tr>
<td>4. Has the community worked with the Canadian Red Cross for prevention and / or preparedness?</td>
</tr>
<tr>
<td>For example, First Aid Training, the Be Safe! kit.</td>
</tr>
<tr>
<td>5. When positive change happens in our community how does community support it, what does the community do?</td>
</tr>
<tr>
<td>One example:</td>
</tr>
<tr>
<td>- <em>positive change</em>: language revitalization</td>
</tr>
<tr>
<td>- <em>community’s response</em>: families working to bring [Cree] back into our community and youth are asking for [Cree] to be taught in school.</td>
</tr>
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<td>6. When crisis happens in our community, how do we come together and what do we do about the following types of crises:</td>
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<tr>
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</tr>
<tr>
<td>(iii) <em>global</em> – for example, the coronavirus pandemic.</td>
</tr>
<tr>
<td>7. One of the things that will be worked on during the Walking the Prevention Pathway programming is a Community Action Plan for violence prevention. The Community Action Plan will support safety and wellness in our community.</td>
</tr>
<tr>
<td><strong>In your opinion, what are three priorities our community should focus on in our violence prevention Community Action Plan?</strong></td>
</tr>
</tbody>
</table>
PUTTING THE STORY TOGETHER

The story has five parts: (1) title page; (2) table of contents; (3) introduction; (4) main body; and (5) conclusion.

1. **Title Page**
   Written by the Community Based Coordinator and includes:
   - the title of the document – Starting Place Story
   - your community’s name
   - a picture, or pictures, of your community
   - the name of the Canadian Red Cross program your Starting Place Story is attached to
   - the date you finished writing the Starting Place Story

2. **Table of Contents**
   - already developed for you in the SPS Outline Template. Includes section and sub-section headings

3. **Introduction** to your Community – opens the Starting Place Story
   Written by the Community Based Coordinator before talking with WTPP participants.
   - Briefly describe your community’s location
   - Explain how the Canadian Red Cross came to be invited into your community

4. **Main Body**
   - Combine community members’ answers for each Quadrant and circle in the quadrant, followed by the Pathways of Healing, into a few paragraphs. You do not need to use every answer that each community member gives you to all the questions. Combine the answers that seem similar.
   - Follow the order you asked the questions through the four Quadrants and the Relational Determinants of Health section
   - At the end of each Quadrant and the Relational Determinants of Health section write a Strengths Summary and Challenges / Gaps Summary.

5. **Conclusion** – closes the Starting Place Story
   Written by the Community Coordinator after all the conversations have been completed.

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• **Share** what community members’ hopes are for learning about the community journey of change process
• **Share** what community members’ hopes are for your community’s vision of wellness and restoring its relational determinants of health

**EXAMPLE OUTLINE OF THE STARTING PLACE STORY**

**Title Page**

**Introduction**

**Main Body**

• **Physical Quadrant Knowledge** *(main heading)*
  - Cycle of Violence *(sub-heading)*
    ▪ Summary of Strengths
    ▪ Summary of Challenges / Gaps
  - Circle of Wellness
    ▪ Summary of Strengths
    ▪ Summary of Challenges / Gaps

• **Mental Quadrant Knowledge**
  - Cycle of Violence
    ▪ Summary of Strengths
    ▪ Summary of Challenges / Gaps
  - Circle of Wellness
    ▪ Summary of Strengths
    ▪ Summary of Challenges / Gaps

• **Emotional Quadrant Knowledge**
  - Cycle of Violence
    ▪ Summary of Strengths
    ▪ Summary of Challenges / Gaps
  - Circle of Wellness
    ▪ Summary of Strengths
    ▪ Summary of Challenges / Gaps

• **Spiritual Quadrant Knowledge**
  - Cycle of Violence
    ▪ Summary of Strengths
    ▪ Summary of Challenges / Gaps
  - Circle of Wellness

• Summary of Strengths
• Summary of Challenges / Gaps

• Relational Determinants of Health Systems Knowledge
  • Summary of Strengths
  • Summary of Challenges / Gaps

Conclusion

AFTER THE STORY HAS BEEN WRITTEN

• **Share** the story with each person you met with. Ask them, after they have read it, if they have time could they please write down and send you any questions or feedback they might have

• **Collect and type up** community members’ questions and feedback

• **Share community members’ questions and feedback** with Dawn-Lee. This will help –
  o You begin to understand the knowledge your community has regarding violence prevention and its hopes
  o Dawn-Lee to adjust the Starting Place Story Framework Manual for the next community
  o Canadian Red Cross facilitators address your community’s specific concerns
  o Everyone to work together in an open and constructive way to create safety for the children, youth, families, and elders in your community

  *Congratulations!*
  
  *Your community’s journey of change for creating safety and wellness is beginning!!*