COGNITIVE DISSONANCE IN SOCIAL WORK – THE EXPERIENCES OF SOCIAL WORKERS WHO FACILITATE TRANSRACIAL ADOPTION PLANS FOR ABORIGINAL CHILDREN

by

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Chapter 1: Introduction

Background of the Problem

I was born in Northern British Columbia (BC) and still proudly call that my home. I am French Canadian Métis. I am a daughter, sister, and mother of three. I am also a social worker. This research study grew out of the convergence of those roles and the struggle I have had in dealing with the sometimes-conflicting values, beliefs, and behaviours that arise from each of those places.

I started working as a social worker for the BC government in 1994, a somewhat ironic choice given the fact that I grew up in a home that overtly opposed the place of government in people's homes. When I began working with children who were permanent wards of the province, I noticed a pattern emerge on my caseload. It was easy enough to find a foster home for a young child. Some of those homes would be temporary and the child would bounce from place to place. Other times we were fortunate and the placements lasted for years. But the majority of foster homes, no matter how stable they at one time seemed, broke down once the child reached the teen years. A series of temporary foster homes would follow, then a last-ditch move to a group home before, out of options, we would move a teen into an apartment somewhere, with the promise of a monthly cheque. I lost count of how many youth I watched "age-out" of the child welfare system on their 19th birthdays. I could give them money for some clothes and rudimentary furniture, but for the most part they were left to fend for themselves. I remember thinking there had to be a better way.

In 1996, I was offered a half-time position as an adoption social worker. I accepted it for practical reasons, wanting to increase the time I could be home with my young children, unaware that this work would alter the course of my life. Adoption

seemed to offer something that foster care did not: the chance for a child to become part of a family, with a lifetime of unconditional love and acceptance. What I didn't realize at the time is that I was only one of many new adoption social workers hired during that period due to a change in legislation that removed a long-standing moratorium on Aboriginal transracial adoptions. The new legislation focused on finding permanency for Aboriginal children while ensuring they stayed connected to their communities and families. I felt like it was an incredible privilege to help create families and to get children out of the revolving door of the child welfare system. Still, at times I was overwhelmed by the enormous responsibility that had been given to me. By the time the children reached my caseload, they were badly damaged by prenatal drug/alcohol exposure, abuse and neglect, and multiple moves. It was my job to find families who would stay committed to them in spite of the challenges. I recall waking up in a cold sweat one night, breathing hard from a dream where a child repeatedly mouthed to me the words, "Help me". I promised myself I would do what I could.

It was not until I went to graduate school in 2004 that I fully began to realize the controversy around the work I was so passionate about. I will never forget the moment, sitting on the floor between the towering library shelves, when I came across Michael Anthony Hart's (2003) article *Am I a Modern Day Missionary?* In it, he reflects on the inner struggles he has experienced as an Aboriginal social worker. He describes how being told by a Cree woman, "Oh, so you're the social missionary" (p. 300) led him to search his soul about the link between the historical colonization of Aboriginal people and his current practice as a social worker. I read the article in one swoop, waiting for his answer, but he didn't leave me with anything clear, concluding, "While I like to think I am not a modern day missionary, I don't honestly know" (p. 308). After that day in the library, I spent a lot of time pondering the same dilemma.

While I was grappling with the implications of my role as a social worker and the colonization of Aboriginal people, something else became apparent: Within the literature, the transracial adoption of Aboriginal children is often viewed as being the most damaging when placed on the spectrum of child welfare services because it permanently removes children from their families (Kulusic, 2005). Some authors describe it as cultural genocide (Fournier & Crey, 1997; Sinclair, 2007b). Crey (1991) compares it to the residential school system, pointing out that "while the conditions under which the children lived in the church-run schools of a decade earlier were deplorable, at least the parents of the children knew where they were" (p. 156). The UN Convention on Genocide (1948), Article 2 (e) states that "forcibly transferring children of the group to another group" constitutes the deliberate destruction of a culture, and defines an element of genocide that is punishable. When looking at this definition, it becomes apparent why some would argue that adoption, particularly as part of the spectrum of child welfare services, is a form of cultural genocide. I have found myself pondering what the literature has to say about social work, adoption, and Aboriginal people. On one hand, it is impossible for me to dismiss the link between colonization and the transracial adoption of Aboriginal children; on the other hand, it is equally impossible for me to ignore the need that all children have for permanency and stability.

For over a decade, I have thought about this dichotomy, searched the literature on it, lost sleep over it, and talked to other people about it. I have found there are no easy answers. From this personal dilemma, some larger questions have emerged about how social workers are impacted by the stressors that arise from working in a field where they are regularly faced with competing values, beliefs, and duties. I have wondered if other social workers experience

similar internal conflicts, how those conflicts impact them, and what they do to live with them. Those questions have ultimately led to this research study.

Statement of the Problem

It seems intuitive that social workers would be vulnerable to various types of workplace stressors given the fact that they must regularly deal with "chaos, poverty, hatred, child abuse, violence, criminality, delinquency, depression, debilitation, incompetence, vulnerability, deprivation, and mental illness" (Davies, 1995, p. 17). Social workers also frequently find themselves caught between oft-competing needs:

> The public, by definition, demands everything and hence presents conflicting demands. For example, affecting a social worker's task there exist such demands as: child protection vs. parents 'rights' protection; child protection vs. adoption made easier for those who wish to adopt; mental health community day centres vs. more asylums (miles from habitation); greater care for children the elderly and disabled vs. tax cuts; civil liberties vs. the dangers of 'high risk' offenders in the community...I think social workers and their managers frequently experience themselves in a position tantamount to that of a victim torn between two aggressors with no presence of a sane and caring authority. (Davies, 1995, p. 12)

Additionally, social workers are vulnerable to stressors because the social work profession is "among the most value-based of all professions" (Reamer, 2006, p. 3), requiring practitioners to honor codes of ethics while constantly evaluating and challenging their personal values. The very emphasis on the role of the individual (with his/her inherent biases, values, ethics, and beliefs) leaves social workers vulnerable to the stress that arises when they experience conflict between their values, beliefs, and actions.

Many lenses (i.e. burnout, vicarious trauma) have been used to focus on the specific ways that social workers are impacted by the stressors they face in the workplace. For my research, I have chosen to use cognitive dissonance, which is described as a state of tension that occurs when a person holds two cognitions (ideas, attitudes, beliefs, behaviours) that are psychologically inconsistent with one another (Tavris & Aronson, 2007). Although cognitive dissonance is not a classic workplace stress model, I feel that it offers an interesting perspective on workplace stress, allows us to focus specifically on value/behaviour conflicts, and provides insight into how social workers resolve the ensuing tension in ways that allow them to continue on in the work.

The theory of cognitive dissonance first surfaced in 1957 when Leon Festinger published his ground-breaking book, *A Theory of Cognitive Dissonance.* Prior to the popularization of this theory, most social psychologists believed that people's actions were primarily motivated by reward and punishment (Tavris & Aronson, 2007). Festinger, however, challenged that idea by theorizing that people are actually motivated by something that transcends punishment and reward: the need to reduce dissonance (Harmon-Jones & Mills, 1999). Festinger hypothesized that people represent the social world as a set of mental cognitions in which any piece of knowledge they hold about the world, their environment, or themselves, including their behaviors, attitudes, or emotions, can be considered a cognition (Cooper, 2012). When their cognitions are inconsistent, or dissonant, they experience a sense of discomfort or tension and are therefore motivated to try to reduce the dissonance.

This research is important for two reasons. Its primary benefit is that it can help us learn more about one particular type of stress that both Aboriginal and non-Aboriginal social workers experience in the workplace. Its secondary benefit is that, by virtue of the fact that I have chosen

two highly under-researched streams through which to explore these stressors (cognitive dissonance in social work and the experiences of permanency planning social workers), it will address research gaps in those two areas. With that being said, although I have chosen to provide focus to my discussion on cognitive dissonance in social work by discussing it in the context of transracial adoption planning for Aboriginal children, I invite my readers to think of the ideas that follow in the context of any type of social work practice.

Research Purpose and Question

The purpose of this research is to add to our understanding of cognitive dissonance and social work, to provide space for the voices of social workers who facilitate transracial adoption plans for Aboriginal children, and to provide suggestions around how we can best support social workers. My research focusses on three primary questions: 1. Do social workers who facilitate transracial adoption plans for Aboriginal children experience cognitive dissonance and, if so, in what ways? 2. How does that cognitive dissonance impact social workers? 3. In what ways do social workers reconcile a sense of dissonance?

Definition of Terms

a) *Adoption:* Historically was used to mean any situation where people are raising children who are not biologically their own; now is used more formally to mean a legal transfer of rights and obligations from birth parent(s) to adoptive parent(s).

b) Aboriginal: Someone who identifies as being First Nations, Métis, or Inuit.

c) *Band*: A band is a group of Aboriginal people whose connection has been arbitrarily defined and imposed by the federal government (Frideres & Gadacz, 2012).

d) *Care and Custody:* Physical care and control of the child (MCFD, 1996b). In adoption language, this term refers to the legal ability to provide day-to-day care to a child.

e) *Child*: A person between the ages of 0- and 19-years-old.

f) *Child(ren) in care*: In BC, this term refers to children who are in the custody, care, or guardianship of the Ministry of Children and Family Development (MCFD) or of a Delegated Aboriginal Agency (DAA).

g) *Community*: Within this research study, this word is used to refer to Aboriginal communities. Although this term can be synonymous with the word "band" when used in that context, it can also refer to a more varied group of people and acknowledges that the delineations imposed by the federal government are not always reflective of how Aboriginal people define their group membership.

h) *Foster Care:* A substitute family setting that has met the criteria set out by a child welfare agency and is able to provide foster care services for a child in the care of that agency (Fouhse, 2007).

i) *Foster-to-adopt*: An adoption placement made between foster parents and a child they are fostering. At times, these foster placements begin as temporary plans and at other times they are viewed as preliminary foster placements that will evolve into adoption placements.

j) *Guardianship:* All the rights, duties and responsibilities of a parent (MCFD, 1996b). In adoption language, this term refers to the legal ability to make all decisions regarding a child.

k) *Interracial adoption:* An adoption where the child and adoptive parent(s) are of the same race and/or ethnic background.

l) *Maintenance:* Funds that are given to a family on a monthly basis to provide for the day-to-day costs of raising a child.

m) *Permanent ward*: Also called a "Continuing Custody Ward" or "CCO". Refers to a child who has legally been made a ward of the province, with the Director of Child Welfare as the sole guardian (Representative for Children and Youth, 2013).

n) *Race:* In the context of adoption, race is used to "signify differences of religion, ethnic origin, or skin color" (Strong-Boag, 2006, p. 107). Race is essentially a social construction used as a way of categorizing people and making sense of the world; it carries with it strong, complex emotions that some argue are the basis for racism (Mullaly, 2007).

o) *Stranger adoption*: An adoption that is made with a family that was not previously known to the child.

p) *Transracial adoption:* The adoption of a child of one racial or ethnic background by parents who have a different racial or ethnic background.

q) *Western:* Refers to a mind-set or worldview that is a product of the development of European culture that is diffused into other nations such as North America (Ermine, Sinclair, & Jeffery, 2004).

Locating the Study within the British Columbia Context

Geographic context. This study took place in the province of BC. According to the 2011 census, BC has a population of 4,324,455 people and a land area of 922,509 km (Statistics Canada, 2011). More than half of the population of BC resides in the 2,877 square km that make up the Vancouver Census Metropolitan area. The other half of BC's population lives in the remaining 99% of the land area, resulting in a highly urbanized, densely populated southern area and a largely rural, more sporadically populated northern area. Of the BC population, 267,085 people identify as being Aboriginal: 202, 535 as First Nations, 2,570 as Inuit, and 70, 200 as Métis (Statistics Canada, 2011).

Legislative and policy context. MCFD has the legal authority and overall responsibility for the delivery of child welfare services in BC. MCFD is mandated to provide a variety of services across the province, including Child and Youth Mental Health (CYMH) services; services for Children and Youth with Special Needs (CYSN); youth justice services; adoption services; and services related to child safety, family, youth and children in care (MCFD, 2014c). Various pieces of legislation govern how these services are provided, including the *Infants Act*, the *Family Law Act*, the *Youth Justice Act*, the *Child Care Subsidy Act*, the *Adoption Act*, and the *Child, Family, and Community Services Act* (CFCSA). My research focusses on the CFCSA and the *Adoption Act* because these two pieces of legislation govern how adoption plans are made for children. Prior to discussing these pieces, it is important to review some changes that have taken place related to child welfare services in Aboriginal communities.

Delegated Aboriginal agencies. Although MCFD governs all child welfare services in BC at this time, since the 1980s, Aboriginal communities have increasingly been taking back child welfare responsibilities for their children. This process takes place through the establishment of Delegated Aboriginal Agencies (DAAs) that provide services on behalf of specific band(s) or communities. Through the delegation process, MCFD and Aboriginal Affairs and Northern Development (AAND) enter into agreements whereby MCFD legally extends delegation to DAAs to carry out some or all of the specific duties listed in the CFCSA. This process is complicated and lengthy. There are three tiers of delegation that DAAs can work towards, each allowing for the provision of an increasing, cumulative range of services: 1. Voluntary services (i.e. support service to families, voluntary care agreements, and resources), 2. Guardianship services (i.e. permanency planning up until the time of adoption placement), and 3.

Child protection services (i.e. child protection investigations and removals) (Representative for Children and Youth, 2013).

The first DAA in BC was established in 1986. By 2013 DAAs were responsible for providing child welfare services to almost 47% of Aboriginal children in care (Representative for Children and Youth, 2013). One hundred and forty-eight of the 198 First Nations bands in BC are represented by agencies that either have, or are working towards, receiving delegation to manage their own child welfare services (MCFD, 2014b) and there are currently 23 DAAs across BC with various levels of delegation (Representative for Children and Youth, 2013).

DAAs are governed in one of two ways. Either they provide child welfare services to the children on a particular reserve and are governed by that First Nations band or they provide services to a larger group of Aboriginal children and families (including those who do not live on reserve) and they are governed by an independent board (Representative for Children and Youth, 2013). In spite of the fact that they are technically governed by band or board members, it is important to note that at this time DAAs work under the CFCSA and operate through government funding. These realities have led to an ongoing debate regarding how much autonomy and control Aboriginal people have over their own child welfare services, even when these services are offered by a DAA.

The Child, Family, and Community Services Act (CFCSA). Generally, children initially come into contact with the child welfare system through the CFCSA. This Act opens with introductory provisions that direct practitioners towards providing services that are as respectful, inclusive, and least intrusive as possible, while ultimately providing for the safety and well-being of children (MCFD, 1996b). For example, the "Guiding Principles" (MCFD, 1996b)

state that the entire Act must be interpreted so that the safety and well-being of children are the primary considerations and go on to direct that:

(a) children are entitled to be protected from abuse, neglect and harm or threat of harm;

(b) a family is the preferred environment for the care and upbringing of children and the responsibility for the protection of children rests primarily with the parents;

(c) if, with available support services, a family can provide a safe and nurturing environment for a child, support services should be provided;

(d) the child's views should be taken into account when decisions relating to a child are made;

(e) kinship ties and a child's attachment to the extended family should be preserved if possible;

(f) the cultural identity of aboriginal children should be preserved;

(g) decisions relating to children should be made and implemented in a timely manner.

(p. 9)

The place of a child's extended family and community is also discussed and practitioners are told that they should inform families of the services that are available to them, encourage families to participate in decisions that affect them; involve Aboriginal people in the planning and delivery of services to Aboriginal families and their children; and involve the community in the planning and delivery of services (MCFD, 1996b). Throughout this Act, reference is made to the importance of making decisions based on the best interests of a child and this introductory section defines what those "Best Interests" constitute, stating that all relevant factors must be considered, including:

(a) the child's safety; (b) the child's physical and emotional needs and level of

development; (c) the importance of continuity in the child's care; (d) the quality of the relationship the child has with a parent or other person and the effect of maintaining that relationship; (e) the child's cultural, racial, linguistic and religious heritage; (f) the child's views; (g) the effect on the child if there is delay in making a decision.(2) If the child is an aboriginal child, the importance of preserving the child's cultural identity must be considered in determining the child's best interests. (p. 10)

Within this introductory section, practitioners are being guided to provide for the safety and well-being of children while working in a way that is as supportive, inclusive, and least intrusive as possible; however, depending on the particular circumstances of a child and family, social workers can choose either more or less intrusive interventions. For example, Section 8 of the Act allows social workers to facilitate agreements whereby parents temporarily transfer care of a child to a friend or family member, with financial support from MCFD, without the child coming into care (MCFD, 1996b). At the other end of the spectrum, Section 13 allows social workers to forcibly remove, and bring into care, a child they feel "has been, or is likely to be" abused (MCFD, 1996b, p. 14). Perhaps one of the most complex aspects of the CFCSA is that, like any legislation, it remains somewhat open to the interpretation of the person using it.

Permanency planning. If it is believed that a child will never be able to return to his/her birth parents and/or if social workers are no longer legally able to extend a child's time in care, they are left with the task of finding an alternate arrangement. This planning is generally referred to as "permanency planning" and involves a variety of legal options of which adoption is only one. It is important to note that the term "permanency planning" can have different meanings, depending on the lens of the person using it. For example, some social workers use this phrase to mean anything outside of temporary foster care, from situations where foster

parents have committed to providing long-term care to situations where community members have maintained contact with a child as he/she has moved through different placements. For the purpose of this research study, the term "permanency planning" will refer to legal plans that are made with the intention of guardianship, care, and custody being officially transferred to a caregiver until the child reaches adulthood. Unofficially, these plans have the intention of providing a lifelong sense of family and belonging to a child. Under the CFCSA and the *Adoption Act*, there are several ways to provide permanency to children.

 CFCSA Section 54.01: Permanent kinship care. In 2013, the CFCSA was amended to include Section 54.01, allowing social workers to facilitate the legal transfer of permanent care and custody from birth parents to a friend or family member without that child coming into care. This plan is made with birth parent consent. MCFD is able to provide maintenance, but no other support services, until the child turns 19, and the guardian is responsible for providing medical, dental, and optical care. MCFD must approve these placements by completing a homestudy, including criminal record checks, doctor's reports, and references.

 CFCSA Section 49: Continuing custody. Under Section 49 of the CFCSA, a social worker can also apply for a Continuing Custody Order (CCO), either with or without birth parent consent. This order permanently transfers care and custody of a child from his/her birth parent to MCFD, essentially making the provincial government the child's legal parent. A child in care under this section is often referred to as a "permanent ward", a "CCO", or a "continuing care ward". After the order is granted, the child's file is generally transferred to a social worker who specializes in guardianship and/or permanency planning for children. Although many continuing care wards stay in foster care until they turn 19, legislation, practice standards, and societal views dictate that plans be found for these children that provide them with continuity and stability. The

social workers left with this task are generally referred to as "guardianship social workers", "adoption social workers" and/or "permanency planning social workers".

CFCSA Section 54.1: Transfer of custody. Under Section 54.1, social workers are able to permanently transfer the care and custody of a child who is a continuing care ward from MCFD to another person. MCFD must approve these placements by completing a homestudy, including criminal record checks, doctor's reports, and references. MCFD is able to provide maintenance, but no other support services, until the child turns 19, and the guardian is responsible for providing medical, dental, and optical care.

Adoption Act. The adoption of children in BC is legislated through the *Adoption Act* (MCFD, 1996a). MCFD social workers are generally involved in two types of adoption placements under this Act. In the first, a social worker places a continuing care ward for adoption, with MCFD consenting to the adoption as the child's legal parent. In the second, a social worker facilitates the permanent transfer of care and custody from a birth parent to an adoptive family. MCFD must approve these placements by completing a home study, including criminal record checks, doctor's reports, and references. All families who adopt children through MCFD are eligible to apply for both monthly maintenance and support services; however, approval is not guaranteed, adding to the pressure experienced by permanency planning social workers who are then tasked with supporting families raising high needs children with no assurance that financial supports will be provided.

Although the route that a child takes from first entering the child welfare system to being placed under one of these permanency options can be complicated, some routes are more common than others. Decisions are made by social workers, their team leaders, and their managers as to whether or not a child should come into care, how long that child should stay in

care, and when and how permanency should be explored. In spite of the fact that these decisions are governed by the CFCSA, the process is somewhat subjective and is often informed by the values of the social worker, management, and the over-arching organization serving the child.

To add to the complexity, there is little consistency across BC regarding how regions choose to structure the provision of child welfare services. In some areas, social workers hold generalized caseloads and provide a variety of services along the child welfare spectrum. In other areas, social workers hold specialized caseloads. Each social worker employed by MCFD is delegated to carry out certain sections of particular Acts, depending on training and job type. A social worker could, therefore, be delegated to provide child protection and guardianship services under the CFCSA and adoption services under the *Adoption Act;* however, in most areas that work is separated out and files are transferred between social workers and/or teams as a child's legal status changes. An exception exists around the area of permanency planning. Permanency planning teams often exist within MCFD where social workers provide a full continuum of services, from guardianship to adoption planning and placement as well as post-placement support.

One reality is important to keep in mind while considering my research findings and discussion. Although it might seem like a fairly straight-forward issue as to whether a DAA or MCFD has jurisdiction over the planning for a particular child, the matter is not that simple. DAA and MCFD social workers regularly share these responsibilities, for a number of reasons. Sometimes the DAA is delegated to provide guardianship duties but must work with an adoption-delegated MCFD office if they are to provide the full range of permanency planning services (i.e. adoption). Sometimes a DAA does not yet have the capacity to provide services to all the children in its catchment area and/or to provide services to children with particularly high

special needs so it must rely on MCFD to keep some of the children on its workers' caseloads while capacity is increased. There are times when a child's band-affiliation is still being deciphered or when a child has lineage but not status with a particular band. Other times MCFD permanency planning social workers must seek written approval from a DAA that represents a child's community in order for an adoption to proceed. In addition, jurisdiction for a child can change as that child's legal status changes. For example, a child could come into care through an MCFD child protection office, become a CCO and be transferred to a DAA with guardianship delegation, and then be transferred to an MCFD adoption office once an adoption placement is made and she/he enters the adoption residency period. In effect, until DAAs are fully delegated to provide all child welfare services and have reached the capacity to provide those services, the lives of Aboriginal children will be impacted by both MCFD and agency social workers. Until then, DAA and MCFD social workers will find themselves in situations where they are planning for the same cohort of children.

In this chapter, I have provided a general introduction to my research topic. In Chapter 2, I will summarize the literature on stress, cognitive dissonance, and transracial adoption and will provide a brief history of Aboriginal people in BC. In Chapter 3, I will describe the research design I employed to conduct this research. Chapter 4 will contain the findings from the interviews I conducted with social workers. Finally, in Chapter 5, I will reflect on my findings, offering suggestions for future research as well as my recommendations for practice.

Chapter 2: Literature Review

My research involves the intersection of two primary issues: cognitive dissonance in social work and the transracial adoptions of Aboriginal children. In the first section of this literature review, I will focus on the former, providing general overviews on cognitive dissonance and workplace stress. In the second section, I will focus on the latter, touching on the history of adoption, Aboriginal people in BC, and issues in transracial adoption. I will close by discussing how the topics of cognitive dissonance and transracial adoption converge.

Stress, Cognitive Dissonance, and Social Work

Cognitive dissonance is at once a simple and a complex concept. Social psychologists have conducted over 3000 different experiments in order to explore its nuances, making it one of the most well-researched theories of that field (Tavris & Aronson, 2007). In that context, it has a very specific, scientific meaning. However, a basic understanding of cognitive dissonance can also be found within Western culture and has embedded itself into everyday language, surfacing in areas such as television, social media and comic strips.

In addition, although an internet search of the words "cognitive dissonance" and "stress" will turn up numerous results, it is important to note that, when viewed purely as a scientific theory, the concept of cognitive dissonance is not synonymous with the concept of stress. It is neither my intention to infer with this study that cognitive dissonance is a model of workplace stress nor to lead my readers to believe that I have used this theory purely from a traditional social psychologist lens. Rather, it has been my purpose to borrow from the field of social psychology in offering my readers a new way to think about some of the stressors (or, in the language of cognitive dissonance purists, "discomfort" or "tension") social workers experience in the field.

month seemed routine in many agencies and was one of the most cited examples of a

stress survival strategy. (p. 551)

There is some irony in these seemingly grim descriptions. In spite of the ubiquitous

reports of workplace stress, research also shows that social workers experience a relatively high

level of job satisfaction (Collins, 2008; Gibson et al., 1989), particularly around relationships

and working with people (Huxley et al., 2005).

What are the causes of the stress? The causes of workplace stress can be broken down

into two broad categories: external characteristics and internal characteristics.

External characteristics. The term "external characteristics" refers to the factors found

either within or outside of the workplace that cannot be directly attributed to the individual

workers. They can be divided up into two primary categories: those found generally in society

and those found within the workplace itself.

Societal expectations can add to the stress of social work. For example, social workers

can be negatively impacted by the competing expectations of the stakeholders they come into

contact with (Graham & Shier, 2014), by community members' beliefs that they should deliver

high-quality services and fulfill roles that often conflict with policy, ethical, and professional

considerations (Graham & Shier, 2014), and by consumerism, which leaves social workers

feeling that they are at risk of complaints or even litigation (Coffey et al., 2009). Social workers

also report feeling undervalued by other professionals and often see their profession as one that

is negatively stereotyped both in the media and by the general public (Gibbons, Murphy, &

Joseph, 2011). Finally, due to social changes and growing pressures in everyday life, they are

faced with the task of dealing with increasing pressures in the workplace, including progressively

more difficult clients (Vyas & Luk, 2010).

Not surprisingly, social workers also cite issues in the workplace that add to their stress. One of the most often-cited concerns is workload, including lack of time to do their jobs properly (Coffey et al., 2009; Jones, 2001; Kalliath, Hughes, & Newcombe, 2012; Vyas & Luk, 2010). Educational programs and professional development training that does not always reflect the realities of day-to-day work create further expectations within the minds of social workers around the way that they are supposed to practice (Graham & Shier, 2014). Blurred lines between their roles and the roles of other professionals (i.e. in the hospital or school setting) can lead to decreased workplace satisfaction as a result of professional de-legitimization (Altshuler & Webb, 2009). Physical working environment can also be an issue for social workers, who describe a need for a well-designed workplace where they have enough space and where they are able to personalize their spaces (NALGO, 1989; Shier & Graham, 2011). For example, social workers can be impacted when organizations implement cubicle offices that provide little privacy and increase the chances of confidentiality breaches, especially in small communities. Within the organizations themselves, social workers cited the stressors as being organizational restructuring/change (Coffey et al., 2009; Shier & Graham, 2011; Storey & Billingham, 2001), poor communication (Coffey et al., 2009), harsh management practices (Coffey et al., 2009; Collins, 2008; Hamama, 2012), lack of resources (Storey & Billingham, 2001), feeling undervalued at work (Coffey et al., 2009), low morale (Coffey et al., 2009), lack of career development (Vyas & Luk, 2010), and poor job security (Storey & Billingham, 2001). Interestingly, supportive work relationships (with co-workers and management) were cited as a source of support (Lloyd, King, & Chenoweth, 2002; Siebert, 2005; Storey & Billingham, 2001) in numerous studies, but social workers also often expressed ambivalence about the role of supportive coworkers and supervisors in stress and stress management (Balloch, Pahl, &

McLean, 1998) and at times cited management as a direct source of stress (Storey & Billingham, 2001).

    Internal characteristics. The term "internal characteristics" refers to the personal characteristics of social workers that make them more vulnerable to being impacted by workplace stressors. Demographics seem to impact how social workers experience stress. For example, female social workers seem to experience more stress than their male counterparts and that stress decreases with age (Bargal & Guterman, 1996; Storey & Billingham, 2001). Older, more experienced social workers experience lower levels of vicarious trauma than their younger, less experienced counterparts (Kadambi & Truscott, 2004; Kim, Ji, & Kao, 2011; Michalopoulos & Aparicio, 2012). Other personal issues relating to burnout include professional seniority (with more senior workers experiencing less burnout), family status (with single female social workers experiencing higher levels of burnout than their married counterparts), and level of education (with higher levels of education leading to higher burnout rates) (Hamama, 2012). The characteristics and life circumstances of workers can also make them more vulnerable to stress. For example, burnout can result from social workers having unrealistic expectations surrounding their jobs, such as believing that they will be a positive influence in the lives of the majority of their clients, that they will consistently be appreciated for the work they do, that they will be able to challenge bureaucracies and be responsive to their clients' needs, and that they will have opportunities for career advancement and increased status (Gibbons et al., 2011; Graham & Shier, 2014). Conflict between family and work can also be a source of stress, with family-related issues impacting levels of stress at work and work-related issues affecting levels of stress at home (Kalliath et al., 2012). Role conflict/ambiguity is also often cited as a reason for stress in social workers (Balloch et al., 1998; Lloyd et al., 2002; Reid, et al., 1999).

Additionally, competing values between administrators and social workers can also be a source of stress (Borland, 1981; Kadushin & Kulys, 1995).

Role stressors: Both an Internal and External Characteristic. Interestingly, concepts of role conflict and role ambiguity are listed as both an internal and an external characteristic leading to workplace stress. A role is "a set of behaviours expected of a person occupying a particular position" (Jex, 1998, p. 10). Because most of us play multiple roles, we live with multiple sets of expectations around our behaviour; within the workplace, those expectations can be both formal (i.e. a job description) and informal (i.e. unwritten office policy). Role ambiguity is described as the stressor we experience when we are unclear about the role(s) we are expected to fill. Role conflict, on the other hand, is the stressor we experience when we receive conflicting information about the role(s) we are expected to fill (Jex, 1998). Workers can experience both intra-role conflicts (i.e. when they receive conflicting information about one particular role) and inter-role conflicts (i.e. when they receive conflicting information from different roles) (Jex, 1998). A good example of inter-role conflict is tension between competing home/work interests/expectations. Women are especially prone to inter-role conflicts around competing home and (paid) work expectations (Becker, 2013; Fletcher, 1991). Given the fact that social workers are predominantly female, it makes sense that they would be especially vulnerable to this type of role conflict. In addition, Van Heugten (2011) claims that social workers experience more role conflict in multi-disciplinary settings than their team members, possibly because their roles are not always well understood by others and because they are given tasks that do not draw on their full abilities.

What are the impacts of the stress? Most of the research supports the perception that stress impacts employees negatively. It has been linked to cardiovascular disease, cancer, ulcers,

headaches/migraines, and skin disorders (Storey & Billingham, 2001) as well as to chronic anxiety, psychosomatic illness, and other emotional problems (Lloyd et al., 2002). Stress can lead to lost working days (Elkin & Rosch, 1990; Kutek, 1998), employee turnover (Cooper & Payne, 1994), decreased job performance (Collings & Murray, 1996; Coyle, 2005; Motowidlo, Packard, & Manning, 1986), increased accidents, unsafe work practices, and disciplinary issues (DeFrank & Ivancevich, 1998).

In social workers, chronic stress can result in apathy and the loss of experienced workers who feel that they are no longer able to effectively help children and families (Mattingly, 2006). Chronic stress has also been linked to headaches, gastrointestinal problems, and respiratory infections (Kim et al., 2011); depression, anxiety, irritableness, and lower marital satisfaction (Jayaratne, Chess, & Kunkel, 1986); imbalance between work and self-development, imbalance between work and family life, and mental and physical health issues (Vyas & Luk, 2014). Secondary trauma, experienced through therapists listening to their clients' stories, can also result in them having impacts similar to their clients, including intrusion, avoidance, and the psychological symptoms associated with hyperarousal (Chrestman, 1999).

There is also the potential for positive impacts from stress. For example, it has been suggested that role conflict can force social workers to be open to different points of view, be more flexible, and be more open to alternate sources of information (Jones, 1993). The challenge of role conflict can reduce boredom (Seiber, 1974) and produce energy (Marks, 1977). Social workers can experience post-traumatic growth from their work, which can arguably be passed along to other social workers vicariously (Gibbons et al., 2011). When we think about stress and social work, our first instinct is to consider the negative impacts of this profession; however, especially when placed within the context of the research on social work and job

satisfaction, it does make sense that social workers are experiencing personal growth not only in spite of, but perhaps in part due to, the experiences they face in the field.

   What strategies are there for dealing with the stress? The most often-cited strategy for decreasing workplace stress involves increasing workplace supports, particularly workplace supervision (Collins, 2008; Kim et al., 2011; Michalopoulos & Aparicio, 2012; Sprang, Craig, & Clark, 2011; Storey & Billingham, 2001). This supervision is especially important for newer workers, who are more vulnerable to stress, and should include educating them about the signs of workplace stress and monitoring them for signs of stress (Michalopoulos & Aparicio, 2012). In addition, supervisors should encourage social workers to have workplace autonomy (Collins, 2008) and positive coping approaches as well as a healthy work-life balance and they should identify workers who require interventions at work due to burnout (Sprang et al., 2011). Social workers cite the need for continued development in the workplace (Coffey et al., 2009; Kim et al., 2011; Vyas & Luk, 2010), training that takes place prior to major organizational changes (Collins, 2009), and peer support (Kim et al., 2011; Pack, 2014; Vyas & Luk, 2010). Of particular interest is the finding that workplace support plays a dual role in the field, both decreasing burnout and increasing overall job satisfaction (Hombrados-Mendieta & Cosano-Rivas, 2011).

   Workload also appears repeatedly as a topic of consideration in the literature (Coffey et al., 2009; Kalliath et al., 2012; Vyas & Luk, 2010). Interestingly, several authors make the point that it is not enough to simply decrease workloads; instead, management should aim to keep workloads manageable but challenging (Storey & Billingham, 2001); to encourage workers to have a balance of more and less challenging cases (Sprang et al., 2011); to create caseloads that

are flexible, that can change, and that meet the workers' capabilities and resources (Shier & Graham, 2011).

Another topic that arises in the literature is the need for jobs to be designed in ways that meet the needs of workers. For example, management could encourage flexible work hours (Sprang et al., 2011; Vyas & Luk, 2010), balance between work life and home life (Kalliath et al., 2012; Sprang et al, 2011), and effective boundaries so that workers make time for activities such as exercising and debriefing with colleagues (Bourassa, 2012).

As stated previously, cognitive dissonance is a model designed to describe human behavior rather than stress; however, as I will show in the coming section, there are many shared themes between these two concepts. In the following section, I will provide a brief overview of the theory of cognitive dissonance and I invite my readers to read the coming pages with the previously-mentioned discussion of workplace stress in mind.

Cognitive dissonance. Previously, cognitive dissonance was defined as a state of tension that occurs when a person holds two cognitions (ideas, attitudes, beliefs, behaviours) that are psychologically inconsistent with one another (Tavris & Aronson, 2007). Its originator, Leo Festinger (1957) hypothesized that people represent the social world as a set of mental cognitions in which any piece of knowledge they hold about the world, their environment, or themselves, including their behaviors, attitudes, or emotions, can be considered a cognition (Cooper, 2012). Cognitions can be consonant (following each other logically), irrelevant (having nothing to do with one another) or dissonant (opposite to one another) (Nail & Boniecki, 2011). When people become aware that their cognitions are inconsistent, or dissonant, they experience discomfort and are therefore motivated to try to reduce the dissonance.

In the words of Tavris and Aronson (2007):

Dissonance is disquieting because to hold two ideas that are contradictory is to flirt with

absurdity and, as Albert Camus observed, we humans are creatures who spend our lives

trying to convince ourselves that our existence is not absurd. At the heart of it,

Festinger's theory is about how people strive to make sense out of contradictory ideas

and lead lives that are, at least in their own minds, consistent and meaningful. (p. 13-14)

Viewed more broadly, cognitive dissonance theory is essentially "a theory about sense making:

how people try to make sense out of their environment and their behavior and, thus, try to live

lives that are (at least in their own minds) sensible and meaningful" (Aronson, 1999, p. 105).

Festinger (1957) noted that any particular element of cognition can be both consonant

and dissonant with various other elements at any given time and he proposed the following

formula to represent the total dissonance felt: $D* = D/D+C$. In this equation, $D*$ equals the total

magnitude of the dissonance, D equals the sum of all elements dissonant with the element in

question, and C equals the sum of all elements consonant with the same element (Nail &

Bonieki, 2011). Using this equation, we can see that dissonance can be reduced in a number of

ways: 1. We can subtract dissonant cognitions, 2. We can add consonant cognitions, 3. We can

decrease the importance of dissonant cognitions, or, 4. We can increase the importance of

consonant cognitions (Harmon-Jones, 2002). It is important to note that not all cognitions have

equal weight in this equation, nor do they each have an equal likelihood of being changed.

Festinger (1957) proposed that certain elements (both consonant and dissonant) are more

important to us than others and therefore they would result in either a lower or a higher

magnitude. Further, the higher the total magnitude of dissonance, the more an individual would

be motivated to reduce it (Nail & Bonieki, 2001). The likelihood that a specific cognition will be

changed to reduce dissonance is dependent on its resistance to change; cognitions that are less

resistant to change are more likely to be changed than those that are more resistance to change (Harmon-Jones & Mills, 1999). In addition, resistance to change is based on how easily the cognition can respond to reality and the degree to which the cognition is consonant with other cognitions (Harmon-Jones & Mills, 1999). The likelihood a behaviourally-based cognition will be changed is dependent on the extent of pain/loss that the person will have to go through in order to make the change as well as the satisfaction they get from the behavior (Harmon-Mills & Jones, 1999). Also interesting is the fact that the more permanent and less revocable a decision is, the greater our need to reduce the dissonance (Aronson, Wilson, Akert, & Fehr, 2007). So, for example, a woman is likely to feel more motivated to reduce dissonance around having gotten an unattractive tattoo versus having eaten something unhealthy.

Aronson et al. (2007) simplify the cognitive dissonance equation by summarizing the ways in which people generally reduce dissonance: 1. They change the behavior to bring it in line with the dissonant cognition, 2. They attempt to justify their behavior through changing one of the dissonant cognitions, or, 3. They attempt to justify their behavior through adding new cognitions. For example, if a man smokes cigarettes and holds two dissonant beliefs regarding smoking (i.e. I believe I am a smart, good person with a reasonable amount of self-control and I believe smoking is unhealthy and silly), he will experience discomfort and attempt to alleviate that discomfort through one of the three methods described above. He might, 1. Quit smoking (change the behaviour to bring it in line with the cognition), 2. Convince himself that the types of cigarettes he smokes are unlikely to cause cancer (justify the behaviour through changing one of the dissonant cognitions), or, 3. Tell himself smoking helps him maintain a healthy weight (justify the behavior by adding new cognitions). Most of us, upon hearing this example, can think of many other examples from our own lives or the lives of those around us. In those

examples, we can see that people will go to great lengths to reduce their dissonance, engaging in extensive denial, distortion, and justification.

One of the most direct ways to reduce dissonance is through the first method listed in the section above: changing one of the inconsistent elements. For example, if a man is having an affair, he can reduce dissonance by stopping the affair. However, if a dissonant behaviour is irreversible (i.e. he got a tattoo) or very difficult to change (i.e. he uses illegal drugs), he might reduce the dissonance by increasing the consonant elements (i.e. justify his use of illegal drugs by telling himself that everyone in his social circle uses drugs) (Nail & Bonieki, 2011). Similarly, if he is neither able to change the dissonant elements nor add consonant elements, he may reduce the dissonance by decreasing the importance of the dissonant elements through cognitive reframing or distortion, referred to as trivialization (Nail & Bonieki, 2011). Individuals engaging in trivializing are not trying to completely eliminate the dissonance; rather, they are minimizing the impact of it. For example, a man who is addicted to drugs may say to himself that everyone dies anyways, so he might as well have fun while he can.

Research paradigms. Since 1955, dissonance theory has inspired many hypotheses and a wide variety of research studies, including research into everything from (Aronson, 1999):

The socialization of children to curing people's snake phobias, from interpersonal attraction to antecedents of hunger and thirst, from the proselytizing behavior of religious zealots to the behavior of gamblers at racetracks, from introducing people to conserve water by taking showers to selective informational exposure, from helping people curb temptation to chat at a game of cards to introducing people to practice safer sex. (p. 108)

Despite the wide variety of topics covered, the studies can be categorized into four main research paradigms: the Effort Justification Paradigm, the Free Choice Paradigm, the Belief-

Disconfirmation Paradigm, and the Induced-Compliance Paradigm (Harmon-Jones & Mills, 1997).

The Effort-justification Paradigm. Research in this area explores the dissonance that arises when a person engages in an unpleasant activity in order to attain a desirable outcome (Harmon-Jones & Mills, 1997). The cognition that you went through an unpleasant activity to obtain something is dissonant with the cognition that you are a sensible, competent person and the greater the unpleasantness of the activity, the greater the dissonance (Tavris & Aronson, 2007). Using classic dissonance theory, we can see that the dissonance is reduced by increasing the desirability of the outcome.

One well-known study was conducted by Elliot and Mills (1959) with university students who were invited to join a group that would be discussing the psychology of sex. However, before they could join the group, they had to pass an entrance requirement: some of the students had to read sexually explicit passages aloud (very embarrassing and uncomfortable) while others had to read sexual words from a dictionary aloud (somewhat less embarrassing than their counterparts' task) (as cited in Tavris & Aronson, 2007). After the initiation, the students were asked to listen to a tape recording of a discussion by the group they had just joined. This recording had been taped previously and was made as boring and trivial as possible. After listening to the tape, the students were asked to rate the discussion on a number of dimensions. Those who had gone through the mild initiation rated the discussion as being "worthless and dull" and the group members as being "unappealing and boring" while those who had gone through the more severe initiation rated the discussion as "interesting and exciting and the group members as attractive and sharp" (Tavris & Aronson, 1999, p. 17).

There are many ways in which this paradigm can be applied to everyday life. For example, research has shown that people in a weight loss program that requires significant effort are more likely to maintain their weight loss over extended periods of time than those in a program that requires less effort (Axsom & Cooper, 1985). This finding could be important for those who wish to be successful at losing weight.

The Free-Choice paradigm. Research in this area explores the dissonance that arises when people have to choose between two alternatives (Harmon-Jones, 2002). Seldom will one alternative be entirely positive while the other is entirely negative and so, after a choice is made, a person will be left feeling dissonance over both the positive elements of the alternative that was not chosen and the negative elements of the alternative that was chosen. This dissonance can be reduced by elevating the positives of the chosen alternative and/or the negatives of the unchosen alternative or by minimizing the positives of the unchosen alternative and/or the negatives of the chosen alternative. Jack Brehm's (1956) experiment is a widely used example. In it, he had women rate a series of household appliances in a survey. He then offered the women a reward for participating in the survey, their choice of two appliances: for one group of women, he had them choose between two highly-ranked items and for the other group he had them choose between a highly ranked item and a lower ranked item. Twenty minutes after the chosen appliance was wrapped and given to them, he had them rate both the chosen and the unchosen appliances again. Brehm found that the women consistently rated the appeal of the chosen appliance higher than before as well as drastically reduced their rating of the appeal of the unchosen appliance. Interestingly, the women who were choosing between two highly rated appliances changed their ratings of the appliances more than the women who had chosen between a highly rated appliance and a lower rated one. Brehm's experiment explored another

important relationship between choice and dissonance. He kept some of the women in his experiment in a control group where each one was given her second-ranked item as a gift, with no choice. He correctly theorized that these women would not change their ratings of the household items because they would experience no dissonance over having chosen a particular gift (Cooper, 2012).

This paradigm suggests a few correlations between dissonance and choice. To begin with, we experience dissonance after making a choice and we reduce that dissonance by changing the way we view the choices. The more difficult the decision, the greater the dissonance. As well, when we have little or no choice in a decision, we experience little or no dissonance.

Although a situation such as the one created by Brehm would seldom present itself in everyday life, the implications of this paradigm can be applied to everyday situations. For example, you might have to choose between purchasing two vehicles: a mini-van (fits your family comfortably, boring) and a sports car (exciting, fast, too small for your family). If you were to choose the mini-van, you would experience dissonance over both the fact that it is boring and that the car is exciting and fast, so you could reduce that dissonance by beginning to think more poorly of the car and more positively of the van.

The Belief-disconfirmation Theory. Research in this area explores the dissonance that arises when we are exposed to information that is inconsistent with our beliefs (Harmon-Jones & Mills, 1999). If we are unable/unwilling to reduce the dissonance by changing those beliefs, we can reduce the dissonance by "misperception or misinterpretation of the information, rejection or refutation of the information, seeking support from those who agree with one's belief, and attempting to persuade others to accept one's belief" (Harmon-Jones & Mills, 1999, p. 7).

Perhaps the most well-known example of this paradigm involves an experiment that was done with the "Seekers", a group of religious believers who claimed that the end of the world was coming at midnight on December 22, 1955 (Cooper, 2012). Their leader, Mrs. Keech, prophesied that a major catastrophe would destroy the earth and only the believers, who would be rescued by a spaceship, would survive (Cooper, 2012). Festinger's research on cognitive dissonance was in its infancy at this time and he and two colleagues, Henry Riecken and Stanley Schachter (1956), decided to infiltrate the group to see how the believers would respond when the prophecy failed. When midnight came and went with neither a rescue nor a cataclysm, the believers responded as Festinger and his colleagues had predicted. By 4:45 am, Mrs. Keech had announced a new vision: the world had been spared because of their faith. Following the failure of Mrs. Keech's end of the world prophecy, some of the believers left the faith, particularly those who had not made a strong commitment (i.e. had stayed home the night of the prophecy, hoping they would not die). Others, however, especially those who had made a strong commitment to the group (i.e. had given away their possessions and waited with the group), increased their beliefs (Tavris & Aronson, 2007). Many of those who had not previously felt the need to proselytize began to call the newspapers to report the miracle and started to try to convert people on the streets (Tavris & Aronson, 2007).

Although a situation like that involving the "Seekers" is unusual, the implications of this paradigm can be applied to everyday life. For example, experiments done on the subject of prejudice show that people will go to great lengths to maintain consonance between their prejudicial beliefs and any inconsistent information they encounter (Tavris & Aronson, 2007). For example, if a person is prejudiced against gay men and we present 10 facts about a gay man that are stereotypically gay (i.e. he has taken ballet lessons) and 10 that are stereo-typically

straight (i.e. he plays football), that person will focus more on the gay stereotypes than on the straight stereotypes in order to reinforce his/her beliefs around gay people.

The Induced-compliance Paradigm. Research in this area explores situations where people do or say something that is contrary to their beliefs or attitudes (Cooper, 2012). Although a person's values or beliefs might prevent her/him from doing something, incentives to engage in that behaviour, promises of rewards, or threats of punishment can provide cognitions that are consonant with the behavior, therefore providing justification for it (Harmon-Jones & Mills, 1999). Interestingly, the greater the number and importance of the cognitions justifying the behaviour, the less dissonance is aroused; therefore, if a person receives a reward to say or do something that goes against her/his values, the smaller the reward, the less dissonance will arise, and the greater the chance that the person's opinion will change to match what was said or done in order to decrease that dissonance. Conversely, if the reward is large, that incentive will provide a consonant cognition that will result in less dissonance, therefore requiring the person to change her/his opinion less in order to match the behavior.

Festinger and Carlesmith (1959) first tested this theory on a group of university students. The students were asked to take part in an experiment to help researchers understand if people would perform better at tasks if they had been told beforehand that the tasks were enjoyable. To begin, they were asked to spend an hour engaged in boring and repetitive tasks. Then they were told that they were part of a control group. Their group had not been told that the task was enjoyable but the other group had. The experimenter said that he now needed them to convince a fellow student from the other group that the task had been enjoyable. Half of the students were offered $20 for telling the lie while the other half were offered $1. After they had spoken to the students from the other group, they were asked how much they had enjoyed doing the original

task. Those who had been paid $20 rated the tasks "as the dull and boring experiences they were" while those who had been paid $1 "rated the task as significantly more enjoyable" (Aronson et al., 2007, p. 194). Using Festinger's cognitive dissonance equation, we can see that the higher reward ($20) created its own consonant cognition (I received a significant amount of money for telling the lie), so those students did not have to convince themselves that the activity had been enjoyable in the same way that the students who received the $1 did (I told a lie to a fellow student for no good reason). This experiment demonstrates how our growing understanding of the power of dissonance to change people's behaviours influenced social psychology. While previously social psychologists would have predicted (using reward-reinforcement theory) that people would respond most favourably to a situation where they were given a large reward, cognitive dissonance theory proved something very important: "human beings think, they do not always behave in a mechanistic manner.... human beings engage in all kind of cognitive gymnastics aimed at justifying their own behavior (Aronson, 1999, p. 108).

This paradigm has been applied to the topic of children and punishment, with interesting results. For example, Aronson and Carlsmith (1963) had an experimenter ask preschoolers to rate the appeal of certain toys. He then told each child that she/he was not allowed to play with the mostly highly rated toy. He threatened half of the children with a minor consequence (he would be annoyed) and the other with a more serious consequence (he would be very angry and would take the toy and never return). He then left the room for several minutes to give the children time to play with the toys. Although none of the children played with the forbidden toy, the children who were threatened with the more serious consequence continued to rate the toy as highly as or higher than before, whereas the children with the minor consequence began to rate the forbidden toy as being less desirable (Aronson et al., 2007). Again, using Cognitive

Dissonance Theory, we can see that the children who were threatened with the more serious punishment had enough justification (via the consonant cognition) not to play with the toy and therefore did not have to change their perspective of it. The children who were threatened with a milder consequence, on the other hand, had little justification to avoid playing with the toy and therefore had to diminish the value of the toy to reconcile the cognition that they had chosen not to play with it. This paradigm could have significant implications in areas such as the development of campaigns aimed at reducing teen drug use.

Proposed revisions to Festinger's Theory. It is important to note that there have been many challenges to Festinger's theory over the years and there are now several empirically-established routes for reducing dissonance; however, changing one of the dissonant cognitions to achieve consonance remains one of the most widely-studied (Norton, Monin, Cooper, & Hogg, 2003). In addition, although revisions have been proposed to challenge the reasons why the situations evoke dissonance and the motivations behind our attempts to reduce that dissonance, most of the revisions agree with Festinger's original theory that "situations that result in dissonance create negative affect and this negative affect motivates the cognitive and behavioral changes found" (Harmon-Jones, 2002, p. 106). It is not within the scope of this paper to debate the efficacy of the challenges that have been made to Festinger's core theory over the years and they will not be described in detail here.

The impacts of dissonance. The idea that dissonance brings about discomfort resonates with people as being inherently true, but what is it that dissonance evokes in us that results in us being willing to do almost anything to escape its effects? Festinger's (1957) original theory focused on what happens inside people's heads: the tension that arises from inconsistent cognitions causes us to be aroused into an uncomfortable state and we are motivated to reduce

that discomfort. During the first 10 years of dissonance research, little attention was paid to those internal processes and the focus instead was on the behaviours that those processes produce (Cooper, 2012). As researchers began to question Festinger's original theory of cognitive dissonance, they also began to question his assumption that dissonance is "experienced, not inferred" (Cooper, 2012, p. 44). Although it took some time, researchers eventually found that Festinger's assumption was correct: dissonance produces arousal in people and it is this arousal that leads to us to try to reduce the dissonance. Later research refined this idea by concluding that it is specifically negative arousal that people are motivated to reduce (Losch & Cacioppo, 1990). Research into the ways in which we are affected by that negative arousal has focused on either physiological or psychological impacts.

Physiological. It was not until 1983 that researchers began to test the physiological impacts of dissonance. Croyle and Cooper (1983) conducted the first experiment in this area, predicting that if dissonance produces arousal, that arousal should be measurable through distinct physiological markers such as increased perspiration in the palm of the hands. They conducted an experiment on university students where they attached each one to a polygraph and led them through exercises aimed to produce various levels of dissonance. They found that, although all of the students initially showed some physiological arousal, the students in the high dissonance group stayed in high arousal, proving that dissonance does lead to increased physiological arousal (Cooper, 2012). Later similar research on university students using improved technology confirmed that dissonance leads to physiological arousal (Losch & Cacioppo, 1990); however, this research went one step further by proving that the dissonance must be both "arousing and aversive" if it is to prompt people to try to reduce it (Cooper, 2012, p. 54).

Cooper, Zanna, and Taves (1978) also conducted some interesting research on students, using amphetamines (to heighten arousal), sedatives (to lower arousal), and a placebo pill containing nothing to either increase or decrease their arousal. The students were asked if they would be willing (free choice) to take one of the three randomly-assigned drugs. They were advised that the experimenter would not know which drug had been given; however, the student would. Although one third of the students were given the amphetamine, one third the sedative, and one third the placebo, they were all told that they had received the placebo. They were then led through a classic experiment aimed at producing either high or low levels of dissonance: half of the students were told to write an essay in favour of something they did not believe in (low dissonance because there was no choice) and the other half of the students were given a choice (high dissonance because they had a choice). The students who had taken the placebo acted the way people typically do in experiments on cognitive dissonance: they changed their attitudes in favor of the essay, with those in the high dissonance group changing their attitudes much more than those in the low dissonance group. The students who had received the sedative experienced low levels of dissonance arousal by the exercise and did not need to change their attitudes in order to reduce that dissonance. The students who had received the amphetamine experienced the highest levels of dissonance and changed their attitudes the most in order to reduce their discomfort. This experiment shows that physiological arousal is a component of dissonance, because if we remove the arousal through a sedative, the need to reduce dissonance is decreased and, if we increase arousal through an amphetamine, the need is increased.

Psychological. Early studies into the impacts of cognitive dissonance focused on scientifically-measurable physiological impacts and it was not until the 1990s that researchers began to investigate self-described psychological discomfort by asking participants to describe

stressful for people and therefore a correlation can be drawn from experiencing cognitive dissonance to experiencing a sense of stress. To reinforce this idea, the previously-discussed research into the physiological impacts of cognitive dissonance measured arousal using skin conductance tests similar to those liked with Post Traumatic Stress Disorder (Aubert-Khalfa, Roques, & Blin, 2008; Shepperd & Wild, 2014), math-induced stress (Hsiao-Pei, Hung-Yu, Wei-Lun, & Huang, 2011), stress experienced during public speaking (Elfering & Grebner, 2011), and stress experienced during surgery (Storm et al., 2002). There are also similarities found in the definitions of stress and cognitive dissonance. Previously, stress was described as a state accompanied by physical, psychological, or social complaints or dysfunctions that results in individuals feeling unable to bridge the gap between their abilities and the expectations placed upon them (Pasca, 2009). On the other hand, cognitive dissonance was described as a state of tension that occurs whenever a person holds two cognitions (ideas, attitudes, beliefs, behaviours) that are psychologically inconsistent (Tavris & Aronson, 2007). Even within these two definitions, we can see similarities. To begin with, stress is widely accepted as a "perceptual phenomenon" and there is a great deal of variability amongst individuals both regarding how they perceive stress and how they are impacted by those perceptions (Tetrick, 1992, p. 34). Therefore, a social worker's *perceptions/cognitions* regarding potential stressors can have more influence on how she/he is impacted by those stressors than the actual stressors themselves. Similarly, when we look at both external and internal stressors, we can see the effect of workers' cognitions on how they are impacted by workplace stressors. For example, research indicates that experienced workers report less stress than their more inexperienced counterparts; undoubtedly, the mitigating factor is not that they are experiencing fewer stressors but that they have learned to *evaluate/respond* to those stressors in a different way. Interestingly, the

accounts can be found in mythological stories, in the Babylonian Code of Hammurabi, in Hindu and Roman law, and in the Old and New Testaments that required followers to help the poor, especially orphaned children (Askeland, 2006). Considering its place in Judeo-Christian teachings, it is not surprising that adoption was known in Europe and everywhere Europeans settled (DellaCava, Phillips, & Engel, 2004).

Although adoption has been around since the beginning of time, beliefs surrounding adoption, including how closely children should match their caregivers in areas such as racial background, have shifted with other societal changes. For example, between the late 1890s and post-World War II, children were viewed as being replacements for biological children and families generally tried to adopt children that were similar to them (Strong-Boag, 2007). After World War II, however, a number of factors resulted in an increase in intercultural and transracial adoptions. To begin with, in the late 1940s and early 1950s, both Canada and the US accommodated thousands of European children (mostly from Greece and Germany) who were orphaned by the war (Howell, 2006). The Korean War resulted in a similar influx of children, this time children who were racially and culturally different from their adoptive parents (Howell, 2006), followed by children from Central and South America, then Romania, then China (Worontynec, 2006). Initially, most of the parents who adopted internationally were doing; so out of a sense of moral obligation, but eventually infertile couples began to adopt internationally as well, as a way of building their families (Howell, 2006). By the 1960s, there had been a significant shift in attitudes around the types of children who would make good candidates for adoption. A number of factors contributed to this change. As stated previously, children from other countries became available for adoption due to war and political changes. Progressive-minded Canadians and Americans began to move away from a belief in racial and biological

inequality to one based on sameness or "color-blindness" (Strong-Boag, 2005). While previous beliefs had supported the idea that children biologically inherited undesirable traits, experts began to say that children could be influenced by the families who raised them, causing adoptees to reconsider children they had formerly stigmatized (Strong-Boag, 2005). At the same time, there was a sharp decline in the number of infants who were available for adoption due to a decreased stigmatization around single parenthood, increased access to birth control, and legalization of abortion. Infertility was increasing amongst North American couples just as parenthood began to take on new significance (Howell, 2006). Additionally, improved health care meant that there were lower infant mortality rates, resulting in more infants coming into the child welfare system with severe medical problems including premature birth and drug exposure (Strong-Boag, 2007). Child welfare workers also became aware of the need to market the growing number of available children. Strong-Boag (2007) points out that in the 1960s in Canada, social workers began to get creative around how they defined hard-to-place children by reframing some of their needs. Older children, children who had previously been diagnosed as "retarded" or physically disabled or those of a minority race or religion were now said to have "special needs" (p. 417). Consequently, by the 1960s, there had been a shift in attitudes in Canada and the US around the types of children who would make good candidates for adoption and families began to consider children who were culturally and racially different from them as well as children who were older and who had medical/emotional issues.

One could say that a perfect storm was created in the 1960s when these global shifts in adoption collided with the on-going colonization of BCs Aboriginal people. In the following section, I will touch on some of the history of BC's Aboriginal population and I will describe

how changing attitudes around adoption directly resulted in an increasing number of Aboriginal children being adopted transracially into Canadian homes and abroad.

BC's Aboriginal people. Many terms are used to describe the pre-Columbian inhabitants of BC, including "Indigenous", "Indian", "Native, and "Aboriginal". In this dissertation, I have used the terms "Indigenous", "Indian", and "Aboriginal" somewhat interchangeably, depending on the context. The word "Indigenous" originates out of a global context and is generally used to describe people who are indigenous to a geographic location. Its increased use has been linked to the 2007 passing of the United Nations Declaration on the Rights of Indigenous People (M. Hart, personal communication, March 3, 2016) as well to the increased connections Canada has developed with other countries regarding shared issues (R. Hoffman, personal communication, Nov. 20, 2015). This word is also commonly used within the context of research and therefore it will be primarily employed in my methodology section. "Indian" is used by the Canadian federal government under the Indian Act to denote those who were recognized as having "Indian status". This term continues to be used at times when discussing historical issues and will be used as such in this document. "Aboriginal" is the term used under the Canadian Constitution to denote people of First Nations, Métis, and Inuit ancestry. It is also the term used under the CFCSA and the *Adoption Act*; however, within those Acts, the term is used somewhat loosely as "a person who is registered under the *Indian Act,* who is of Aboriginal ancestry, or who considers her/himself to be Aboriginal" (MCFD, 1996b, p. 6). It is important to note that, because its use is a product of the Canadian Constitution, the word "Aboriginal" is viewed by some as being colonial in nature. Whenever possible, the terms "Métis", "Inuit", and "First Nations" should be used to describe those respective groups and, ideally, people of First Nations descent should be described according to their specific tribal

affiliations. In order to protect the confidentiality of participants and because it is used within BC child welfare legislation (and is therefore embedded in the language of social workers), the term "Aboriginal" will be used most often in this study.

In order to have an understanding of current issues around Aboriginal transracial adoption in BC, one must have at least a foundational understanding of the history of BC's Aboriginal people. This history begins thousands of years ago, when this land held many diverse Aboriginal cultures that were "large, proud, and well-organized" (Duff, 1997. p. 61). Although their societies were diverse and had individual languages, cultures, politics, and spiritual systems in place, they generally shared common beliefs regarding social identity that are upheld to this day, such as the interdependent relationship between community identity and individual identity. These beliefs impacted the way that children were cared for and, as stated previously, each community developed its own processes such as adoption/kinship care (Carriere, 2010), conflict resolution, and giving community resources to birth parents to make sure they had what they needed to provide care to their children. It was rare for parental responsibilities to be severed completely (Blackstock, 2009).

Initially, the arrival of English and French explorers on Aboriginal territories was mutually beneficial. For example, Aboriginal women created influential kinship networks through their marriages to fur traders (Sleeper-Smith, 2012) and Aboriginal men were skilled traders who benefitted from their roles as "middle-men...provision suppliers, canoe builders, canoe and boat men, and farm labourers" (Ray, 2012, p. 118). These dynamics began to change as European motivations shifted to settlement and the extraction of other resources, resulting in efforts being made to minimize the Aboriginal presence through the removal of Aboriginal people from their lands; the placing of restrictions on Aboriginal movement; the careless

harvesting of natural resources; and, eventually, the regulation of Aboriginal people and reserve lands (Government of Canada, 1996). The Royal Commission on Aboriginal People estimated that the population of Aboriginal people in Canada decreased 80% from the time of first contact to confederation due to diseases, bounty hunting, and starvation (Government of Canada, 1996). This huge loss of life, added to the displacement of Aboriginal people from their lands and their forced relocation to reserve lands where traditional ways of living were not possible, resulted in the loss of communal knowledge and ways of living. Children were particularly impacted because of their vulnerability to disease, the trauma they experienced by losing so many members of their families, and the introduction of multi-generational grief and trauma (Blackstock, 2009: Blackstock & Trocme, 2005;).

The residential school era. The Indian Act of 1876 further changed the situation for First Nations children by giving the responsibility for their education to the federal government. The result was the establishment of 80 residential schools across Canada by 1931 (Walmsley, 2005). Attendance was compulsory at these schools, which were designed to assimilate Aboriginal children into Western society, eliminating what government officials called "the Indian Problem" by replacing Aboriginal ways-of-being with "Eurowestern culture, knowledge, and spirituality" (Blackstock & Trocme, 2005, p. 14). The missionaries, who until the 1960s controlled Aboriginal education, were more focused on converting the children than on teaching them practical information and skills (Frideres & Gadacz, 2012). The conditions in these schools were very poor because they were built with cheap building materials, run by untrained staff, and often overcrowded due to the federal government's financial incentives designed to increase enrolment (Blackstock & Trocme, 2005). Tuberculosis and small pox spread rampantly and sexual abuse, physical abuse, and neglect were wide-spread (Blackstock, 2009). According to

the Truth and Reconciliation Commission of Canada (n.d.), of the approximately 150,000

children who attended residential schools between the 1870s and the 1990s, more than 4,100

died of disease or accident (para. 3).

The residential schools had a far-reaching impact not only on the children who attended

them, but also on subsequent generations of Aboriginal children. One of the biggest travesties of

residential school life was that students often grew up without healthy adult role models. In a

quest to assimilate the children and transform them from "heathens" into Christians, contact was

limited with their parents and extended family. The few adults in the schools were usually non-

Aboriginal and they were generally unqualified to provide adequate stimulation or to act as

suitable role models; as a result, healthy child-adult relationships rarely developed (Frideres &

Gadacz, 2012) By the late 1940s, several generations of students had returned from these

schools as poorly educated, angry, and abused adults (Fournier & Crey, 1997). As a result of

having lived in institutionalized settings, many of them had weakened decision-making skills

(Hick, 2010). Some struggled with addictions to drugs and alcohol as well as with mental health

issues that resulted from the trauma they had endured (Hick, 2010). Many survivors had grown

up without parenting role models to emulate in their interactions with their own children and

grandchildren.

The 'sixties scoop'. Prior to 1951, there was no real provision for child welfare services

on reserve as the *Indian Act* did not specifically discuss child welfare. Although federal and

provincial governments were providing some services, there was no clear authority around who

held responsibility, in part because neither provincial nor federal governments wanted to take on

the financial costs (Aboriginal Justice Implementation Commission, 2001). In 1951, the *Indian

Act* was amended to make status First Nations people living on reserve subject to provincial

authority around child welfare (Green & Thomas, 2009; Hick, 2010; Representative for Children and Youth, 2013). It is important to note that the federal government did not provide provinces with extra funding until 1966, resulting in a patchwork of service provision; some agencies extended services to include children living on reserve, others did not, and some would only remove children in "life or death" situations (Aboriginal Justice Implementation Commission, 2001, para. 35). In any case, by 1952, the province of BC had begun to provide services to Aboriginal people in "matters related to delinquent children, unmarried mothers, and adoption cases" and by the 1960s, residential schools began to fall out of favour as people increasingly began to recognize that Aboriginal children were not doing well in them (Stanbury, 1975, p. 210). It was during this transitional period that the number of Aboriginal children in the child welfare system rapidly increased: there were 29 in 1955, 849 in 1960, and 1446 in 1964 (Walmsley, 2005). In some cases, so many children were removed from a community that buses had to be used by social workers as they transported groups of children off reserve (Union of BC Indian Chiefs, 2002). Many of the children who were apprehended were placed for adoption into mostly non-Aboriginal homes in Canada, the US, and other countries. Although official statistics tell us that 11,000 status First Nations children were adopted out, some Aboriginal spokespeople put that number at 20,000 to 50,000, arguing that the smaller number only includes status children (i.e. not Métis, Inuit, or non-Status First Nations) and does not account for situations where a child's ancestry was intentionally wrongly recorded in order to increase her/his adoptability (Carriere & Sinclair, 2009).

The literature provides numerous reasons for this influx of Aboriginal children into the child welfare system; it is important to note that some of these explanations are somewhat conflictual in nature and seem to depend to some extent on the perspective taken by the

author(s). Some contend that as the residential school system became discredited, the child welfare system became the government's new agent of assimilation and colonization (Blackstock, 2009; Hick, 2010; Johnson, 1983). One financial incentive is said to have come from private American adoption agencies that paid Canadian child welfare agencies between $5000 and $10 000 (Bennett, Blackstock, & De La Ronde, 2005; Lavell-Harvard & Lavell, 2006) or $15000 to $20000 (Downey, 1999) for each adopted child. Another argument is made that, as responsibility for child welfare on reserve was rolled out to the provinces, the federal government inadvertently provided financial incentives to encourage the removal of children from their homes by basing funding structures on the number of children who were apprehended (Lavell-Harvard & Lavell, 2006). As stated previously, however, it is important to note that, in reality, the federal government did not begin to cost-share the provision of child welfare services with provinces until 1966 (Aboriginal Justice Implementation Commission, 2001).

Some authors claim that social workers were unwilling or unable to accurately assess the dire circumstances in Aboriginal communities. Because children who attended residential schools generally grew up without healthy adult role models, they were negatively impacted in their ability to build on these experiences to create healthy, secure relationships with their own children (Armitage, 1995). Fournier and Crey (1997) paint social workers as "wolves in sheep's clothing", naïve professionals who made judgment calls around Aboriginal children using a white, middle-class lens. They suggest that living conditions on most reserves were poor at that time due to financial mismanagement and manipulation by the government; instead of investing funds into supporting families and communities, the government simply removed their children.

Authors such as Bridget Moran (1992), who practiced social work in BC during the 1960s, seem to take a more moderate stance regarding the role taken by social workers.

Although she echoes the belief that there were inadequate supports for families, Moran also points out that social workers required further supports to do their work properly, describing some of the strains of working in large geographical areas with limited resources:

> In that huge wooded territory which I reckoned to be about the size of Holland, I was responsible for the elderly, children, the poor, people of all ages with mental and social problems, and the infirm. My areas included an Indian residential school, Lejac, on Fraser Lake, and five Indian reservations, every one of them a textbook study in poverty, disease, and despair. (p. 27)

This period, when Aboriginal children were removed from their homes at increasing rates and placed in mostly non-Aboriginal foster and adoptive homes in Canada and the US, lasted from the 1960s to the mid-1980s and has been called the "Sixties Scoop". This expression came from author Patrick Johnson's description of a conversation he had with a social worker, who told him "with tears in her eyes – that it was common practice in BC in the mid-sixties to 'scoop' from their mothers on reserves almost all newly born children. She was crying because she realized – 20 years later – what a mistake it had been" (as cited in Sinclair, 2007a, p. 20).

In spite of the myriad of reasons given for the historical influx of Aboriginal children into the child welfare system, the fact remains that the statistics are somewhat startling. What is perhaps even more surprising is the fact that these numbers continue to rise even as the numbers of non-Aboriginal children in care decrease (Foster, 2007).

The 'millennium scoop'. Since the 1980s, Aboriginal communities have become increasingly vocal around the need for systemic changes within the child welfare system. Federal and provincial governments have endeavored to improve the outcomes for Aboriginal children both by amending legislation and by funding Aboriginal child welfare agencies. These

changes have occurred with the understanding that a distinct Aboriginal approach is required in the provision of child welfare services to Aboriginal children; however, in spite of these changes, the situation for Aboriginal children remains dire and they continue to be over-represented in the child welfare system (Representative for Children and Youth, 2013). Although they make up only 7% of the population of Canadian children, they comprise about 50% of the children who are in care (Hick, 2010; Representative for Children and Youth, 2013). In BC, while about 1 in 100 children are in the care of the provincial government, that number increases to 1 in 20 for Aboriginal children (MCFD, 2007a). In addition, once Aboriginal children enter the child welfare system, their outcomes are less positive than their non-Aboriginal counterparts. They more likely to become continuing care wards than non-Aboriginal children (MCFD, 2003), they come into care at a younger age, stay longer, and are frequently placed transracially (Rosenbluth, 1995). In fact, although the residential school era is portrayed as a dark period in the history of Aboriginal children, it has been estimated that there are now as many as three times more Aboriginal children in care in Canada than were placed in residential schools at the height of those operations in the 1940s (Blackstock, 2003). Some authors have coined the term "Millennium Scoop" to describe this most recent era of Aboriginal child welfare (Fournier & Crey, 1997; Sinclair, 2007b).

Emerging controversies over Aboriginal transracial adoption. By interfacing the history of adoption with the history of colonization and BCs Aboriginal people, it becomes apparent that Aboriginal children were entering the child welfare system just as other changes were occurring: society's increasing acceptance of transracial adoptions, the growing belief that children can be positively impacted by the parents who raise them, a trend towards multiculturalism and "color-blindness", and the decreasing availability of Caucasian infants. In

addition, child welfare professionals were making a concerted effort to find homes for these hard-to-place Aboriginal children, marketing them in popular newspapers as prime candidates for adoption (Strong-Boag, 2005); however, changes gradually began to occur in the 1960s and 1970s that resulted in people taking a more critical look at Aboriginal transracial adoptions and by the 1970s, provincial governments had become less supportive of these placements (Strong-Boag, 2005). Several factors contributed to these changes. To begin with, there was a growing focus in North America on the importance of acknowledging and addressing adoption issues rather than rejecting them and trying to make them invisible (Kirk, 1964) as well as a growing acknowledgement that transracial adoptions could result in losses for Aboriginal children. For example, in 1972 a BC judge made a very public ruling against the adoption of an Aboriginal child into a non-Aboriginal home due to a concern that he would lose his status. The BC Court of Appeal later ruled that children would retain their status after adoption; however, ironically, the court also ruled that "the best interests of the child lay in viewing the child as an individual, and not as part of a race or culture. A good home environment in which the child could build character takes precedence over a return to Indian culture" (as cited in Strong-Boag 2004/2005, p. 11).

At the same time, an outspoken adoptions rights movement that had been growing louder since the 1960s became increasingly harder to ignore (Strong-Boag, 2004/2005). For example, in 1972, the National Association of Black Social Workers published the following unequivocal statement around the adoption of their children:

> Black children belong physically and psychologically and culturally in black families
> where they receive the total sense of themselves and develop a sound projection of their
> future. Only a black family can transmit the emotional and sensitive subtleties of

perceptions and reactions essential for a black child's survival in a racist society. Human

beings are products of their environment and develop a sense of values, attitudes, and

self-concept within their own family structures. Black children in white homes are cut

off from the healthy development of themselves as black people. (as cited in Butler-

Sweet, 2011, p. 194)

Child welfare advocates also began to speak out against Aboriginal transracial adoptions.

A 1975 report by the British Columbia Royal Commission on Family and Children's Law

criticized the BC *Adoption Act* for its role in alienating Indian children from their heritage and

furthering the destruction of Indian culture (as cited in Strong-Boag, 2004/2005). In 1981, the

chief of the Spallumcheen Band in BC became concerned about the cross-cultural adoptions of

children from his band and launched a caravan which travelled to Vancouver to confront the

minister of human resources, receiving a substantial amount of publicity that led to a larger

movement amongst Aboriginal leaders and, eventually, an increase in Aboriginal-controlled

child welfare (Sinclair, 2009; Walmsley, 2005).

In 1982, Judge Edwin Kimelman was asked to complete an inquiry into the number of

Aboriginal children being adopted cross-culturally in the province of Manitoba. His scathing

report concluded that Aboriginal people had a legitimate right to be concerned:

In 1982, no one, except the Indian and Metis people, really believed the reality – that

Native children were routinely being shipped to adoption homes in the United States and

to other provinces in Canada…No one fully comprehended that 25% of all children

placed for adoption were placed outside of Manitoba. No one fully comprehended that

virtually all of those children were of Native descent. (Kimelman, 1985, p. 272-273)

Kimelman (1985) recommended that Aboriginal children should only be placed in non-Aboriginal homes as a last resort and said that more supports should be placed in Aboriginal communities to ensure that their children could remain there.

At the same time, some research was showing that Aboriginal children placed in non-Aboriginal adoptive homes were not faring well. Between 1972 and the mid-1990s, several studies on transracial adoption highlighted issues around both identity and adjustment (Fanshel, 1972; Hollingsworth, 1997). York (1992) says that officials in Pennsylvania reported that 90% of Aboriginal adoptive children required professional help because they were struggling to adjust to their non-Aboriginal adoptive homes. He attributes these issues to the fact that these children experienced profound racism and were in "limbo between two cultures – uncertain of who they are, unsure of where they belong" (p. 218). By 1992, the BC government had placed a moratorium on all transracial Aboriginal adoptions in BC (Carriere, 2007b). Although this moratorium presented an immediate solution to some of the concerns around Aboriginal transracial adoption, it presented a new dilemma: what could be done about the burgeoning number of Aboriginal children sitting in the foster care system, and what could be done to address these children's needs for stability, permanency, and a sense of belonging? In 1996, a new *Adoption Act* was implemented in BC, attempting to address both Aboriginal children's needs for cultural connections and their needs for belonging and permanency. In the first few pages of this dissertation, I described how it was the implementation of this Act that led to me being hired as an adoption social worker.

Aboriginal transracial adoption and cultural planning. Following the proclamation of this *Adoption Act*, the moratorium on Aboriginal adoptions was lifted and standards were put into place that attempted to formalize consultation with community members and cultural

connections for children. These standards mandated that social workers must first look at adoptive homes within a child's immediate family, then within the community (i.e. band), next within the larger Aboriginal community (i.e. other Aboriginal families in BC), and lastly at non-Aboriginal homes. With the lifting of the moratorium came other new rules around how transracial Aboriginal adoptions would occur. They would require the consent of the child's community, signing of a cultural plan (Appendix A), and approval by an "Exceptions Committee" made up of a group of community-chosen consultants.

In spite of the fact that the moratorium has been lifted on Aboriginal transracial adoption in BC, there continues to be significant controversy surrounding these placements. In the following section, I will discuss some of the most salient of these issues in order to provide context regarding the arguments that both support and oppose them. Because social workers must weigh out these factors when making placement decisions for children, this information can also help increase our understanding regarding why making adoption plans might result in cognitive dissonance in the workplace.

Issues in Aboriginal Transracial Adoption

Attachment. Previously, it was described how the "sentimentalization of children" that began in the 1950s led to changes in how children were viewed, directly impacting ideas around adoption. Two men who contributed to this growing body of knowledge were Harry Harlow and John Bowlby. Harlow was an American psychologist who performed social isolation/maternal deprivation experiments on monkeys (Holmes, 1993). He set up an experiment where he separated young monkeys from their mothers and offered two surrogates: wire mesh molded into the shape of a monkey with a bottle attached and a terry-cloth covered monkey with no bottle attached. His research showed that the baby monkeys clung onto the terry-cloth monkey and

only went to the mesh one when they needed food. He concluded that emotional support was important in the mother-child relationship and that babies who are separated from their mothers show abnormalities in their own parenting behaviours (Holmes, 1993).

English child psychiatrist John Bowlby, who was influenced by the work of Harlow, is credited as being the originator of "Attachment Theory". When he was asked by the World Health Organization in the 1950s to write a report detailing the impact of World War II on homeless children, Bowlby had an opportunity to study a large number of children who had experienced deprivation. Over time, he came up with the idea that there is an irreplaceable bond between a mother (the primary caregiver) and her child and it is damaging to the child to break that bond (Bowlby as cited in Takas & Hegar, 1999). One of the philosophies of Attachment Theory that especially pertains to adoption is the belief that the mother/child bond forms a working model for all future meaningful relationships (Hughes, 1999). The implication, then, is that permanent psychological damage can result from breaking that bond and a child's ability to form healthy relationships throughout his/her life span could be severely compromised.

The ideas of both Harlow and Bowlby have become pivotal in the field of child welfare; however, some people argue that attachment is a Western construct that cannot be applied to Aboriginal children in the same way that it is applied to non-Aboriginal children. Although Aboriginal communities are not homogenous, Aboriginal child-rearing is generally based on values around shared parenting rather than one sole attachment figure (Neckoway, Brownlee & Castellan, 2007). In addition, the Aboriginal concept of family is not a nuclear family model but an extended family model that can include aunts and uncles, grandparents, elders, and other community members, all of whom share a collective responsibility for child rearing. Due to the housing shortages on many reserves, extended family members often share the same home,

allowing the mother to rely on other adults to help meet her children's needs, simultaneously strengthening her children's feelings of connection and stability (Neckoway et al., 2007). Therefore, the primacy of the mother/child bond and the idea of the importance of one consistent primary caregiver are called into question. Further, limited research on attachment theory has been conducted on non-Western cultures so its application to Aboriginal populations is unknown.

When we apply the idea of Attachment Theory to the previous discussion on colonization and the Sixties Scoop, several other considerations come to light that are unique to Aboriginal people. To begin with, the argument can be made that the ability of post-residential-school parents to create healthy connections with their children was severely impacted not only by the abuse and neglect they suffered, but also by their own lack of cultural and community connections. In addition, children were often removed during that period based on Western ideologies, including a value around children being raised within a nuclear family with one primary caregiver. Those children were then placed with adoptive families where they lost a sense of connection not only to their immediate families but also to their extended communities, perpetuating that generational disconnect. Many people have subsequently argued that it was a major error to remove these children from their family networks and that doing so created a loss of identity which could not ever be mitigated by the perceived advantage of having one primary attachment figure (Carriere & Richardson, 2009; Fournier & Crey, 1997).

An additional layer is added to this discussion when we consider the previously-described tendency in the 1960s and 1970s to place children in adoptive homes in a way that involved a "color-blind" discounting of the importance of culture and a disconnection from the children's traditional communities. As discussed, policies have since been created to try to mitigate some

of this disconnection such as having Aboriginal communities agree to adoption plans in writing and having adoptive parents sign cultural plans that outline how the child will stay connected to her/his community and culture.

Carriere and Richardson (2009) contend that, while Attachment Theory is useful in helping child welfare practitioners ensure that children receive early, consistent nurturing, the idea of "connectedness" is more fitting than that of "attachment" for Aboriginal children. They define "connectedness" as "a feeling of belonging, of being an important and integral part of the world" (p. 52). This sense of belonging is interwoven with the family connections that are an inherent part of Aboriginal communities, resulting both in strong, healthy children and strong, healthy communities. In further support of this idea, research conducted by Hendry and Reid (as cited in Carriere & Richardson) found that connectedness acted as a deterrent in adolescents for high-risk issues such as poor body image, a high degree of emotional stress, school absenteeism, or risk of injury or pregnancy. Inversely, Lee, Lee, and Draper (as cited in Carriere & Richardson) found that people with low connectedness often experience feelings of loneliness, anxiety, jealousy, anger, depression, and low self-esteem.

The idea that Attachment Theory may not be applicable to Aboriginal children has a direct impact on how social workers create adoption plans. To begin with, due to the overrepresentation of Aboriginal children in the child welfare system and the scarcity of Aboriginal adoptive homes, Aboriginal children have generally been placed with non-Aboriginal adoptive parents, away from their communities. The focus has therefore been on creating healthy attachments based on the model of one consistent, nurturing caregiver; however, if the "connectedness" described by Carriere and Richardson (2009) is more important to an

Aboriginal child's health and identity than a secure attachment to one primary caregiver, the justification for these transracial adoptions is called into question.

Identity. The literature on transracial adoption consistently cites identity-related outcomes as the most salient of the issues for those adopted transracially. One of the pivotal arguments around the ethics of these placements involves whether or not children can develop a healthy sense of identity when they grow up with parents who do not share their racial background. In fact, as stated previously, some contend that, due to the negative impact of transracial adoption on identity-formation, it is a type of cultural genocide (Fournier & Crey, 1997).

The concept of identity is complex in itself. The way that people evaluate the parts of their lives that they feel are important is integrated into their self-esteem and, by adolescence overall self-concept is tied into an individual's identity which is in turn impacted by concepts of ethnicity. A child who has been adopted transracially has an additionally complex task because she/he must develop this overall self-concept without adoptive parents who share the experience, often while experiencing stigma and prejudice within society (Bagley, Young, & Scully, 1993).

Issues of self-concept and identity formed in adolescence can have a significant impact on future behaviors. Rosenberg and Kaplan found that "self-concept measured in the early years of secondary schooling can with some accuracy predict school failure, school drop-out, drug and alcohol use, suicidal ideas and behavior, and teenage pregnancy" (as cited in Bagley et al., 1993, p. 55). On the other hand, a child with a healthy identity framework has what psychologists call "ego strength" which can later lead to resilience around stress factors (Bagley et al., 1993). Interestingly, an extensive study conducted by the Evan B. Donaldson Adoption Institute (2009) found that transracial adoptees said that the importance of racial/ethnic identity increased in

significance as they got older: 60% said it was important in middle school with that number growing to 67% in high school, 76% in college and 81% in young adulthood.

One topic that surfaces repeatedly around transracial adoption and identity-formation is that of racism and discrimination. A significant number of transracial adoptees report discrimination, from overt racism to more covert forms such as teasing about their appearance; in fact, a number of studies of transracial/international adoptees have found that up to 80% of people in this group have had these experiences (Evan B. Donaldson Adoption Institute, 2009). Dealing with this racism becomes difficult when you are growing up in a family that does not share your experience and where those experiences are not part of the family ethos; adoptees then tend to internalize their pain and may engage in self-destructive behaviours (Carriere & Sinclair, 2009).

One of the most salient issues presented by people who oppose transracial adoption is that these types of placements negatively impact the development of positive racial identity, which is one of the core components of healthy human development. They argue that the end result is that transracial adoptees have poorer psychological outcomes than those who are adopted interracially (Brodzinsky, Smith, & Brodzinsky, 1998).   In fact, like the research on attachment, the research on identity-formation shows mixed results, perhaps due to methodological restraints (i.e. sample size) and the heterogeneity of the population being researched.

While the general identity-related issues for transracial adoptees are also faced by Aboriginal transracial adoptees, they face several unique issues as well. To begin with, the history of colonization adds a complex layer to the formation of identity for Aboriginal adoptees. The removal of Aboriginal children from their homes and their placement in non-Aboriginal

As discussed previously, since the mid-1990s, the transracial adoptions of Aboriginal children in BC have required the creation of cultural plans to ensure that children grow up with a healthy sense of identity; however, there is ongoing controversy over the efficacy of those cultural plans. They are not legally binding and are seldom monitored for follow-through. No research has been conducted on whether or not they actually result in improved outcomes around identity formation for Aboriginal adoptees. Finally, some people argue that the stipulations laid out in the cultural plans (i.e. dance and language classes) cannot substitute for the substantive, authentic, lived experience of growing up within a culture (Evan B. Donaldson Adoption Institute, 2009).

Additionally, the argument has been made that spirituality plays a significant and distinguishing role in the formation of Aboriginal identity (Carriere, 2007a; Carriere & Richardson, 2009) and therefore research that addresses identity issues for Aboriginal transracial adoptees must consider this element. Disconnection from culture causes an intrinsic sense of spiritual disconnection, which can in turn result in a sense of loss and, ultimately, a negative impact on health. Due to this interplay of tribal identity and individual identity, the importance of spirituality, and the legislation and history around Aboriginal adoptions in Canada, one could argue that the issue of identity plays an even more complex and important role with Aboriginal children than it does in other transracial adoptions (Child Welfare League of America, 2000).

There is a substantial amount of literature on outcomes around identity-formation written by Aboriginal people who were themselves involved in the child welfare system. Much of this research is anecdotal and provides mixed perspectives. For example, Kulusic (2005), herself an Aboriginal adoptee, describes how the very nature of her placement in a non-Aboriginal home made the reclaiming of her cultural identity seem like "one of ultimate betrayal" of her adoptive

family (p. 6). She describes how, even as an adult writing an article on identity, she feels a sense of betraying them. Fournier and Crey (1997) describe how transracial Aboriginal adoptions have decimated Aboriginal people's sense of identity on both an individual and community level. However, in her thesis on Aboriginal transracial adoptions, Swidrovich (2004) contends that the benefits of being adopted far outweigh any loss for Aboriginal adoptees. Nuttgens' research concluded that if transracially-adopted Aboriginal children were connected to family, community and culture, they could have positive racial identity (as cited in Carriere, 2007b). Carriere and Sinclair (2009), both Aboriginal transracial adoptees, claim that, although loss of identity is a significant issue for Aboriginal transracial adoptees, "the positive outcomes beckon further inquiry in order to find more balance in the Indigenous adoption discourse" (p. 265).

When comparing the growth of Aboriginal transracial adoption with the amount of research that has been conducted on this topic, it is apparent that our practice of placing these children grew far more quickly than our understanding of how to promote healthy identity development for them and their families. This fact holds true for all children adopted transracially (Evan B. Donaldson Adoption Institute, 2009). Although a substantial amount of research has been conducted on transracial adoption in general, this research indicates different findings depending on the sample being studied. It also calls into question whether or not we can actually generalize findings from one group of transracial adoptees to another. For example, the transracial adoptions of Korean children feature substantially in the literature; however, can these findings be generalized to Aboriginal transracial adoptees, especially given the fact that in North American society the stereotypes around Asian people and Aboriginal people are so different? It appears that more research needs to be conducted on outcomes for each particular group.

Best interests. The idea of considering the best interests of a child is not new; in fact, the Massachusetts Adoption Act of 1851, which directly influences adoption laws in Canada, mandated that the best interests of a child be taken into consideration when making an adoption plan; however, it was not until the middle of the 1900s that it became widely accepted that the best interests of a child should be the paramount focus in any decision around placement (Kahan, 2006). That concept has since grown to pervade current philosophy on adoption and on child welfare in general and, as discussed previously, is predominantly featured in the *Child, Family, and Community Service Act* (1996). The philosophy that the best interests of a child should be of utmost importance in the planning for that child seems obvious; however, even the legislation shows some of the intricacies of operationalizing this concept. What, for example, takes precedence with an Aboriginal child? Preserving cultural identity or the importance of permanency and stability?

Individuals and groups interpret the idea of best interests differently, depending at least in part on their vantage points. Previously it was discussed that Aboriginal communities generally hold to the belief that the rights of the community supersede the rights of the individual child (Snow & Covell, 2006). Therefore, judicial standards that are based on the interests of the individual child conflict with this world view, which prioritizes extended family and community connections (Carriere, 2007a). The argument is made that you cannot separate out what is best for the community from what is best for the child because they are symbiotically connected. Further, proponents of this view contend that child welfare workers who are called upon to meet the best interests of a child hold the significance of cultural connections in decreasing importance over time, instead prioritizing the bond with foster and prospective adoptive parents (Crichlow, 2002, p. 94). Those who argue that the best interests of a group and/or community *are* the best

interests of a child often point out that the social/cultural structures that lead to these types of

placements reflect deeply-held biases that do not acknowledge the strengths of those children's

cultures; further, they point out these types of adoptions result from a failed social welfare

system which inadequately assesses child protection issues and then inappropriately supports

disadvantaged families. In that context, they are a means of oppression for both individuals and

communities (Brodzinsky et al., 1998).

Snow and Covell (2006) describe how the UN Convention of the Rights of the Child

(United Nations, 1989) has brought to light a similar issue around best interests and children's

rights. Canada has refused to withdraw its reservations around article 21 (which calls for state

regulation of adoption), citing the need to respect Aboriginal communities and compensate for

historical wrongs by allowing Aboriginal control over the adoption of Aboriginal children. The

committee has urged Canada to work towards withdrawing its reservation. The authors point out

that there is confusion around the best interests within the Convention of the Rights of the Child.

Article 3 says the best interests are to be a "primary" consideration while article 21 (which

addresses the issue of adoption) says that best interests are to be a "paramount" consideration.

How to determine which outcome is in a child's best interests and how to include the other rights

listed in the Convention remains a dilemma. For example, the sixth paragraph of the UN

Convention (1989) states its intention around, "recognizing that the child, for the full and

harmonious development of his or her personality, should grow up in a family environment, in

an atmosphere of happiness, love and understanding" (p.1). Again, although the idea of best

interests seems intuitive, how to interpret the definition of those interests remains debatable.

In summary, the efficacy of Aboriginal transracial adoptions remains a subject of debate

that presents several concerns that are unique to the Aboriginal context. Regardless of beliefs

around issues such as attachment and identity-formation, many authors present an over-arching argument around Aboriginal self-governance and the intrinsic right of communities to make decisions for their own children. As Carriere (as cited in Carriere, 2010) states:

> Canadian provinces continue to administer adoption programs with little or no consideration to the inherent rights of First Nation children. Canadian policy places the issue of adoption and First Nation children within a context of cross-cultural adoption, failing to recognize the contradictions of this practice. The issue is not about race, color, or national origin; it is about the preservation of First Nation self-determination within a continuing colonial context. (p. 51)

Aboriginal communities have been working towards creating their own child welfare programs since the 1970s, including obtaining delegation to facilitate their own adoptions. In spite of that change, the numbers of Aboriginal children in care has continued to increase, making the debate around Aboriginal transracial adoption on-going.

The Convergence of Cognitive Dissonance and Aboriginal Transracial Adoption

In this literature review, I summarized two over-arching topics: Cognitive dissonance and Aboriginal transracial adoption in BC. Although I began this research journey believing that social workers are significantly impacted when these two pieces intersect, I felt it was important to conduct this research in order to find out if that belief was supported through the experiences of my participants. In addition, I felt that listening to the actual voices of the impacted social workers could help move our understanding from a cerebral level to a heart-felt level. Finally, I felt curious about how social workers were experiencing dissonance, how they were impacted by it, and how they were managing the discomfort.

In reading the following sections, I would invite my readers to consider thinking about cognitive dissonance in a way that is somewhat altered from that presented in the social psychology-based literature. The experiments described in the literature are much more time-limited and controlled than what social workers would experience in the field. While those experiments examine the experience of dissonance within a single, controlled incident, I would argue that social workers have the potential of coming across dissonance-producing experiences many times throughout each day. Because of this difference, although the current literature on cognitive dissonance provides a solid framework from which to explore cognitive dissonance with my participants, a somewhat expanded vision of this theory is required in order to fully consider all of its implications.

As stated previously, my three research questions are as follows: 1. Do social workers who facilitate transracial adoption plans for Aboriginal children experience cognitive dissonance and, if so, in what ways? 2. How does that cognitive dissonance impact social workers? 3. In what ways do social workers reconcile a sense of dissonance? In the following section, I will discuss the research design I used to explore these areas.

Chapter 3: Research Design

I conducted this research from a very personal place and therefore this research design could not help but be both personal and multi-faceted. While writing the previous chapter, I could feel the tension of navigating the academic process of systematically describing the literature with the much more personal process of owning my part in it. For example, from an academic perspective I can easily cite the literature that states that identity issues are often experienced by transracial adoptees, but it is more complicated for me to describe the sorrow that this knowledge brings to me, the difficulty that lies in realizing that your life's work may have contributed to a person questioning the very essence of who she/he is. Choosing and articulating my research design was no less complicated, though in different ways: I was left to navigate the fact that I bring several different, sometimes seemingly contradictory lenses to this work. I am a social worker with a Master's degree in social work but I am completing a dissertation in Health Sciences. I am a Métis woman engaging in research in the world of academia where the viewpoints of Indigenous people have historically not been respected. I have chosen a theory of social psychology to explore an issue with social workers using qualitative data collection tools. Finally, I have chosen an Indigenous research framework, claiming it is decolonizing while unashamedly acknowledging that it weaves together and gives equal space to Indigenous and Western ways of thinking.

The most difficult decision I made while completing this dissertation involved the choice of my research design. After much reading, consultation, and soul-searching, I chose to use Métissage as the framework for my study, employing primarily Western qualitative methods for data collection/analysis (i.e. semi-structured interviews and thematic analysis), with Indigenous

philosophical assumptions (i.e. regarding ontology, epistemology, methodology, and axiology) to guide me, particularly around my ethical choices.

The concept of a braided Métis sash has been used as a symbol for Métissage. I came to visualize my research design as a braid consisting of these 3 large strands (Métissage framework, qualitative methods, and Indigenous philosophical assumptions) along with many interwoven smaller strands. In this chapter, I will describe why I chose this research design and how I operationalized it to create this piece of research. First I will describe Métissage as a research framework. Then I will provide a brief summary of qualitative research. I will go on to outline my use of Indigenous philosophical assumptions to guide my ethical choices. The remainder of this chapter will be used to describe the steps I followed in operationalizing my research.

Strand 1: Métissage as my Research Framework

On being Métis. Before describing Métissage, I will provide some context regarding why I chose this framework by touching on some of the factors that make Métis people distinct. By considering Métissage within the larger context of Métis history, we can gain a greater understanding of why this distinct research approach has arisen and why it might appeal to Métis researchers.

Although Métis people were greatly impacted by colonisation, they also face unique experiences that are a result of their specific history. To begin with, Métis identity is often not as clear as First Nations identity. In the late 1800s and early 1900s, many Métis were given the choice to either become status First Nations people by aligning themselves to certain treaties or to "take scrip" which meant they were given money or parcels of land but gave up all further claims to land (Hick, 2010). Due to the stigmatization of First Nations people, many Métis chose to take scrip and those who could pass as being non-Aboriginal often did. The impact was

that the Métis became an "invisible people" who fit into neither the First Nations world nor the non-First Nations world. In part because of this historical context, many Métis continue to struggle with their own identity.

To add to this struggle with identity, there is also confusion and dissention on a community level regarding Métis identity, specifically who can and cannot call themselves "Métis". There are three main arguments around who should be able to claim this identity (Barman & Evans, 2009). One is that this term should be applied exclusively to those of mixed race who can trace their roots back to the historical Red River Colony. The second contends that this term should be applied to those of mixed race who have developed customs, a way of life, and recognizable group identity which is separate from that of other Aboriginal or European ancestors (Barman & Evans, 2009). The third is that this term should be applied to those of mixed race who self-identity as Métis. At this time, there is no consensus on a community level regarding who is and is not Métis. An additional layer to this confusion around identity lies in the reality that many Métis people have married First Nations people (Frideres & Gadacz, 2012). Because of this intermarriage, a person may be Métis on one side and status or non-Status First Nations on the other side and may choose to identify as Aboriginal, Métis, or First Nations.

In addition, there is a lack of understanding in society regarding Métis identity. For example, Métis children and families are often stigmatized when professionals question whether they are genuinely "Aboriginal". As Jeannine Carriere (2008) writes:

> Our reality as Métis people is that we have some issues with identification and membership at the political level for Métis adults in our nation, so how can we be confident that the needs of Métis children are being met in such a complex environment as the child welfare system? (p. 61)

Due to these identity issues, acknowledgement and belonging are distinct issues for Métis people (Richardson & Seaborn, 2009). In response to this quest for identity, rather than claiming to belong to either Western or First Nations worlds, many Métis argue for the concept of a Third Space (defined further in the following pages) that is both different from, but connected with, Western and First Nations identity. I would argue that this concept of a Third Space can be extended from ideas surrounding identity and belonging to those surrounding knowledge generation, including how we conduct research.

Métissage: A historical perspective. Métissage is a concept that has been applied far beyond Métis people or the field of research. It has also been used as a linguistic artifact, a theoretical construct, and a literary strategy (Chambers et al., 2008). The word "Métissage" comes from the root word "Métis", which has both Latin and Greek origins. Its Latin origin, "mixtus", means "mixed" and refers to cloth that is woven from two different fibers (Worley, 2006). Métissage therefore implies a mixing and attempts to describe "the braided and polysemic character of our lives, experiences, histories, and memories that are…personal as well as collective (Donald, 2004, p. 24-25). Metis, the wife of Zeus, had the gift of transforming things; Métissage therefore "carries the ability to transform and, through its properties of mixing, opposes transparency and has the power to undo logic and the clarity of concepts" (Chambers et al, 2008, p. 141). Instead of polarizing difference, it affirms difference (Lionnet, 1989).

Although it is not exclusively a Métis concept, Métissage is a research praxis that has strong roots in the Canadian Métis tradition as well as in other colonial contexts. It shares the root word "Métis" which loosely translates as "crossbreeding", a derogatory term for racial mixing and procreation viewed as weakening gene pools and "mongrelizing the human race" (Donald, 2012, p. 536). In that context, it has been used

to describe cultural mixing and hybridization of identities as a result of colonialism and transculturalism (Donald, 2012).

At the heart of Métissage research is the understanding that Métis people are continually interweaving different, sometimes contradictory realities regarding identity. Donald (2012) discusses the dichotomy that Métis people find themselves caught within, having ancestry both from the colonizers and the colonized, and experiencing the ensuing "pressure to choose sides, to choose a life inside *or* outside the walls of the fort" (p. 534). He contends that more complex understandings of human relationality are required "that traverse deeply learned divides of the past and present by demonstrating that perceived civilizational frontiers are actually permeable and that perspectives on history, memory, and experience are connected and interreferential" (p. 534). Métissage is offered as a way to honour that tension. In the words of Hasebe-Ludt, Chambers, and Leggo (2009):

> We take métissage as a counternarrative to the grand narratives of our times, a site for writing and surviving in the interval between different cultures and languages, particularly in colonial contexts; a way of merging and blurring genres, text, and identities; an active literary stance, political strategy, and pedagogical praxis…we braid strands of place and space, memory and history, ancestry and (mixed) race, language and literacy, family and strange, with strands of tradition, ambiguity, becoming, (re)creation, and renewal into métissage. (p. 9)

A Métissage framework allows researchers to acknowledge and openly name the Third Space that Métis people exist within, a space that overlaps with Western and First Nations spaces while at the same time remaining separate and distinct. Lowan-Trudeau (2012) notes that this Third Space is an "existential and epistemological meeting place where Western and Indigenous

knowledge and perspectives collide, mix and mingle to form new cultural expressions and understandings" (p. 118).

As stated previously, the analogy that is used for Métissage research is that of the Métis sash, with its bold colors that are intermingled through a process of braiding, allowing researchers to strategically choose from different research methods to create a distinctive research approach (Donald, 2012; Kelly; 2013). Lowan-Trudeau (2012) discusses his own journey towards envisioning this concept, describing how he began with the concept of Bricolage, which stems from a traditional French expression for crafts-people who creatively used materials left over from other projects to create new objects. When used in the context of qualitative research, it involves "taking research strategies from a variety of scholarly disciplines and traditions as they are needed and in the unfolding context of the research situation. Such action is pragmatic and strategic, demanding self-consciousness and awareness of context from the researcher" (Steinberg, 2006, p. 119). Although similar to Bricolage, Métissage is distinct in three important ways. First, when used as an Indigenous research strategy it must by definition honour the centrality of Indigenous knowledge and community protocols (Kovach, 2010). Secondly, it is inherently decolonizing in nature. Finally, it has traditionally embraced a blending/blurring of distinct parts as opposed to Bricolage which has historically embraced the distinction of parts (i.e. discrete bricks that make up a wall). With that being said, there are different perspectives within the literature regarding how the symbol of the braid can be envisioned in Métissage. In the previous quote by Hasebe-Ludt et al. (2009), reference is made to "merging and blurring genres, texts, and identities" (p. 9). Similarly, Lowan-Trudeau (2012) notes that, within a Métissage research framework the bricolage process leads to a mixing or blending that is so complete that "the parts can no longer be extracted from the whole" (p. 116).

However, in a later article he questions whether or not it is actually advisable or even possible to completely blend Western and Indigenous perspectives (Lowan-Trudeau, 2013). After searching the literature and asking several community members who expressed varied opinions, he suggests "an intercultural, integrated, *bricolage* of two or more approaches, being careful to recognize and discuss the original sources of the knowledge" (2013, p. 11). Kelly (2013) seems to envision Métissage similarly, noting that it "acknowledges multiple threads of identity, histories, perspectives and stories…the patterns become discernable from a distance. As in weaving, the patterns only fully emerge when the *métissage* is complete" (p. 24 – 25).

It is important to recognize that some discomfort stems from the ideas of blending and braiding as well as from the overall concept of the Third Space that Métis people inhabit. Pieterse (as cited in Lowan-Trudeau, 2011) notes that hybridity makes people uncomfortable because it blurs boundaries and pushes us beyond dualistic concepts of culture and race. Chambers et al. (2008) note that, as a political praxis, Métissage resists heterophobia, or the fear of mixing, and the desire for a pure, untainted space, language, or form of research. I believe that if Métissage is to be used genuinely, the discomfort that stems from braiding together Western and Indigenous ways must be openly acknowledged. As the colours in a Métis sash sometimes blend together and other times are discernable from one another, forming an overall distinct pattern, at times the threads of my research have blended together and at other times stand separately, side-to-side. In keeping with the thoughts of Lowan-Trudeau (2013) and Kelly (2013), it has been my goal to recognize and name the original sources of knowledge for the various strands whenever possible and I will attempt to do so in the coming pages.

A Métissage framework resonates as a good fit for me on every level. I believe research can be a form of decolonization and I wanted to choose a research design that has the potential to

be decolonizing. It was also very important to me to choose a design that felt genuine to me rather than simply an exercise in tokenism. Métissage offered a pathway for me to engage in Indigenous research in a way that genuinely embraces my individual Métis identity, which I believe is part of personal decolonization.

Strand 2: Qualitative Methods

Although an underlying dichotomy may exist between choosing an Indigenous framework and Western qualitative methods, in my mind that dichotomy is mitigated by the fact that I very intentionally chose these qualitative methods as one of the strands that I braided with my Métissage framework. In order to provide an understanding of the relationship between Indigenous and qualitative research, I will provide a brief description of qualitative research and will then discuss some of the perspectives on the interplay between the two. It is important to note that although I will be discussing Western qualitative research in a general sense, this term encompasses a large body of research methodologies and methods and assumes a range of epistemological frameworks; however, there are general themes that are found within qualitative research that I will draw on in this section.

Qualitative research. The roots of qualitative research can be found in the late 1800s and early 1900s in fields such as anthropology and the social sciences; however, it was not until the 1960s and 1970s that researchers began to advocate for alternatives to the traditional, scientific methods that had largely been employed up until that time (Creswell, 2005). During this period, the social justice movement led to substantive changes in the academic context as people began to question the dominant scientific paradigm and move towards including those historically excluded from research or included in ways that "reinforced stereotypes and justified relations of oppression' (Leavy, 2014, p. 2). Researchers became more cognizant of power

within the research process (Leavy, 2014) and began to argue that research should rely less on the researcher's views and more on the participant's views. As well, they stressed the importance of setting, context, and the personal meaning attributed by the participants (Creswell, 2005). Traditional methods had assumed that researchers could maintain a neutral and objective stance; however, proponents of qualitative research challenged this idea and called for researchers to be transparent about their personal biases, values, and assumptions. In addition, while traditional research looked for facts, scientific rigor, causal determination, prediction, and generalization of findings; qualitative research sought meaning, illumination, understanding, and a way of extrapolating to similar situations (Carey, 2012; Hoepfl, 1997).

Qualitative research has developed as a way for researchers to learn about social reality: It is often used to explore, describe, or explain social phenomenon; unpack the meanings people ascribe to activities, situations, events, or artefacts; build a depth of understanding about some aspect of social life; build 'thick descriptions' of people in naturalistic settings; explore new or under-researched areas; or make micro-macro links (illuminate connections between individuals-groups and institutional and/or cultural contexts) (Leavy, 2014, p. 1).

Although qualitative research encompasses a wide variety of methods and methodologies and continues to develop, it contains some general characteristics such as the need to include the participants' views, collect data in the places where people live and work, and be transparent about researcher bias. Another attribute of qualitative research is that it calls upon the researcher to continually reflect upon and revise the research journey and process as it unfolds rather than attempting to follow a precise, linear process (Carey, 2012). Qualitative research also often gives voice to marginalized groups, promoting care and sensitivity, looking for rich and meaningful

textual and/or personal interactions, and ultimately advocating for change and for the betterment of people's lives (Carey, 2012; Creswell, 2005). In keeping with this thought, there is a social justice undercurrent to qualitative research, "one that may be implicit or explicit, depending on the positioning and goals of the practitioner and the project at hand" (Leavy, 2014, p. 2). Given its social justice flavor, it is no wonder that as Indigenous research has emerged within academia, it has often contained elements of qualitative research; however, it is important to note that there is an interesting and complex tension between the two and the relationship is an evolving one, with some dissent within the literature on how the two should ideally relate.

The round dance. Much of the literature that examines the interplay between qualitative and Indigenous research holds the two as distinct while at the same time acknowledging that the distinctions are not always clearly definable. For example, Kovach (2009) recognizes the complicated nature of this relationship by questioning whether or not it should be termed "a round dance" (p. 23).

One of the most salient arguments made for the distinct nature of Indigenous research is that philosophical assumptions (ontological and epistemological belief systems) ultimately guide the entire research process and therefore, if research stems from Western philosophical assumptions, it cannot be entirely congruent with Indigenous research strategies. Botha (2011) contends that some of these important epistemological differences are Indigenous research's acknowledgment of the interconnectedness of physical, mental, emotional, and spiritual elements of individuals with all living things and with the earth as well as its need to conform to Indigenous ethical protocols and cultural imperatives. Lavallée (2009) similarly contends that Indigenous research includes traditional, spiritual knowledge that has been passed down through generations and is acquired though revelation (i.e. dreams, visions, and intuition); because this

knowledge cannot be observed, measured, or quantified, it is often dismissed by Western researchers. Lavallée (2009) further argues that, unlike Western qualitative research, Indigenous research is inherently decolonizing research. She claims that following an Indigenous research framework requires a *re*writing and *re*righting of the Indigenous position in history and society; this process of decolonization can only be done by incorporating Indigenous knowledge into research rather than relying on Western theories. Kovach (2009) also describes some of the underlying philosophical assumptions that make it difficult for qualitative and Indigenous research methodologies to be completely consistent with one another. She writes, "there is a fundamental epistemological difference between Western and Indigenous thought, and this difference causes philosophical, ideological, and methodological conflicts for Indigenous researchers" (p. 29). Some of these differences include the need for individual researchers to be guided by their own cultural and tribal epistemologies and the need for research to be guided by the Indigenous knowledge found in the distinctive structure of tribal languages (Kovach, 2009). Kovach acknowledges, however, that "the current field of qualitative research is an inclusive place" (p. 27) and points out that there are ways in which Indigenous research and qualitative research have interrelated characteristics. She concludes that "Indigenous methodologies and qualitative research form at best an insider/outsider relationship" (p. 31).

Earlier I stated that an inherent component of Métissage research involves being able to sit with the discomfort that arises from bringing together historically-dichotomized concepts and I feel that the use of qualitative methods within an Indigenous framework is an excellent example of that. Given the overlap between qualitative and Indigenous research strategies, I feel that they can successfully be braided together; however, I also agree with Botha's (2011) contention that there are at times important philosophical differences between the two. For that

reason, I intentionally chose a third strand, Indigenous philosophical assumptions, to guide me around the moral and ethical choices I made during this project. When contradictions have arisen, I have deferred to my Indigenous philosophical assumptions, reflecting that my choice of Métissage as a research framework acknowledges and embraces the fact that Métis people are continually interweaving different, sometimes contradictory realities.

Strand 3: Indigenous Philosophical Assumptions and Ethical Considerations

As stated previously, I chose to use Indigenous philosophical assumptions to guide my research, paying particular consideration to how they could inform my ethical choices. In this section, I will provide a brief overview of some of the philosophical assumptions that can be found within an Indigenous paradigm. I will discuss some of the ethical considerations that became a part of this research study and will complete this section with a review of the evaluative criteria I used to inform the processes.

Gaining knowledge of an Indigenous paradigm. A paradigm is "a set of beliefs about the world and about gaining knowledge that goes together to guide people's actions as to how they are going to go about doing their research" (Wilson, 2001, p. 75). Embedded in an Indigenous paradigm are philosophical assumptions around ontology, epistemology, methodology, and axiology. Wilson (2008) notes that these components are not discrete and, rather than thinking of them as four separate entities, they can be envisioned in a circle, with one expanding upon and informing the other.

Ontology. Ontology is a theory about the nature of existence and the nature of reality and essentially asks, "What is real?" (Wilson, 2008, p. 33). Because there is no definite answer to this question, each person develops their own ontological set of beliefs. These beliefs about what is "real" then embed their research and become a foundation for discovering more about

this agreed-upon reality. One important aspect of Indigenous ontology is the concept of reciprocity, which is the idea that, as we receive from others, we must also give. In this giving, we honour the value of all relationships, human and non-human (Hart, 2009).

    Epistemology. Epistemology is "the study of the nature of thinking or knowing" and essentially asks "how do I know what is real?" (Wilson, 2008, p. 33). It includes beliefs about knowledge, where it comes from, and whom it involves (Kovach, 2009, p. 46). In the research context, it asks questions such as what is considered knowledge and what can be counted as legitimate knowledge (i.e. is subjective knowledge actual knowledge?) (Kovach, 2009). Being transparent about your epistemological beliefs gives your readers the advantage of knowing the interpretive lens through which you are conducting your research and making meaning of your findings (Kovach, 2009). Examples of Indigenous epistemology include teachings being transmitted through story-telling, the importance of perceptual experience, and the value of visions and dreams (Ermine, 1995; Hart, 2009). Epistemology is tied to ontology because what you believe is real will impact how you think about that reality; in addition, the choices you make about what is real will depend upon how your thinking works and how you perceive the world around you (Wilson, 2008). Another component of Indigenous ontology is the importance of community; however, a seeming paradox exists in that the individual is also viewed as having personal integrity and honour within the community (Ermine, 1995). In fact, the individual's right to experience his or her own life within the collective has traditionally been unequivocally recognized by Indigenous people (Ermine, 1995).

    Methodology. Methodology refers to the "assumptions, postulates, rules, and methods – the blue print or road map – that researchers employ" (Given, 2008). It differs from methods in that methods refer to the specific ways in which qualitative researchers collect data in order to

build their argument. Methodology asks, "How do I find out more about this reality?" (Wilson, 2008, p. 34). It refers to the theory of how knowledge is gained and the science of finding things out (Wilson, 2008). Essentially, your view of what reality is (ontology) and how you know this reality (epistemology) will impact the ways more knowledge can be gained about this reality (methodology). Kovach (2009) points out that to ignore the epistemology behind your methodology is to miss out on a deepened level of knowledge. One interesting component of Indigenous methodologies is that, not only do they create new knowledge, but they also take the researcher on a journey that essentially changes her/him (Weber-Pillwax, 2001).

Axiology. Axiology asks, "What part of this reality is worth finding out more about…what is ethical to do in order to gain this knowledge, and what can this knowledge be used for?" (Wilson, 2008, p. 34). It includes not only your values as a researcher but also the actions that reflect those values. Some of the values noted within literature on Indigenous research include relationality, accountability, use of self, cultural safety, Indigenous control, and decolonization.

Ethical considerations. All research poses potential ethical issues, both anticipated and unanticipated. It was important to me to have a plan around ethical decisions before beginning my research and at the same time I recognized the importance of having guidelines available to provide me with direction when issues arose unexpectedly. Throughout my research, I drew on the above-described Indigenous philosophical assumptions, the guidelines of the UNBC Research Ethics Board, my social work codes of ethics, and my own moral compass. In situations where I was unsure how to engage ethically, I consulted with my thesis supervisor. Below I will outline some of the ethical considerations that guided my work, drawing on the previously-discussed Indigenous philosophical assumptions.

Reciprocity. Hart (2009) and Kovach (2009) state very clearly that Indigenous research needs to benefit Indigenous people. One of the goals of this research is to benefit Indigenous social workers by providing information on cognitive dissonance. When this research is complete, I will provide copies to my participants and I will offer to travel to their communities to present my findings to their teams. I will also provide copies of my research to permanency planning social workers in BC (via a shared drive), to the DAAs in BC, and to MCFD management. In addition, I will present my findings at conferences and in journals.

I felt very aware while undertaking this research that my participants were gifting me with their time and wisdom and it was important to me to give back to them and to community. Giving gifts of food, preferably homemade, is part of my culture and I gave my participants homemade jam, a gift card to a coffee shop, and a thank-you card. It was also important to me to travel to their home communities, especially to the smaller communities where social workers can often feel isolated, and I offered to conduct each interview in the participant's town. While interviewing my participants, it was my goal to be reciprocal in our conversations as well, so I left as much time as possible for discussion. Although most of my interviews were about 90 minutes long, one lasted for 4 ½ hours, in addition to a follow-up phone call.

Use of self/transparency. As researchers, we need to transparently lay out our positions and to acknowledge that our values, beliefs and experiences essentially become part of the research (Hart, 2009; Wilson, 2008). In keeping with that self-reflection, we must grapple with the fact that at times we have insider status and at other times outsider status and there is not always a clear-cut boundary between the two.

It was my goal throughout this research to use my "self" appropriately and transparently. One challenge involved the fact that I was sometimes an insider and other times an outsider,

requiring me to show mindfulness regarding the different layers to these relationships and humility around the ways in which I could and could not join with my participants. For example, some of the DAA social workers I interviewed identified as being First Nations; with those women, I experienced insider status (both women, both Aboriginal, both social workers, both work in permanency) and in other ways I experienced outsider status (I do not work for an agency, I am not First Nations).

Another challenge involved the way in which my personal "self" is intertwined with this research. The topic I chose was very important to me. My participants were my peers and in some cases my friends, and their stories were often intertwined with mine in very personal ways. I tried to manage this overlap by being mindful around the need for reflexivity, which is "self-awareness, political/cultural consciousness, and the ownership of one's perspective" (Patton, 2002, p. 64). I created a journal and wrote poetry and found both to be helpful in cuing me to be reflexive. I disclosed my cultural identity and my roles (i.e. former MCFD social worker, student, university instructor) to all of my participants. While writing my findings and discussion sections, I endeavored to present the information in an objective manner while at the same time being open about my personal values and beliefs.

Another ethical issue that arose involved the dual relationships that I had to navigate. The social work community is quite tightly knit and in some cases I held multiple roles with my participants. It was important for me to openly acknowledge those roles rather than compartmentalizing them because I felt doing so created safety for my participants and for myself. For example, when I asked friends/former colleagues to participate, I did so via email so they would have time to consider my request and I openly acknowledged the fact that they are likely very busy and I did not want them to feel pressured to participate. I was also mindful of

workers and social work students. I consulted with several Indigenous community members and allies face to face as well as through two presentations of my research plan before beginning my data collection. As stated previously, I will ensure that Indigenous social workers and community members have access to my findings.

Relationality. Relationality is one of the most important components of Indigenous world views and refers to the idea that all things are connected and people need to come together with respect and humility to help and support one another (Hart, 2009; Tuhiwai-Smith, 1999; Wilson, 2008). Indigenous methodologies highlight the need for relational accountability, which means that we must be accountable on both individual and collective levels by ensuring that our work genuinely benefits others (Hart, 2009).

I addressed this concept in my research in a number of ways. As stated previously, I chose a research topic that I believe will benefit Aboriginal and non-Aboriginal individuals as well as the larger community of social workers. I chose Métissage as my research framework, in part because at its core it embraces the idea that lives are relational and braided rather than isolated and independent (Donald, 2012). I honoured the subjective experiences of my participants by allowing the interview to take on a "conversational" flow where my participants were invited to share their stories with me. I focused on being curious, open-minded, and respectful of the fact that their experiences could be very different from mine. I kept my participants' stories as intact as possible within my dissertation, providing quotations in order to respect the individual voices of my participants.

Hart (2010) states that one example of respect includes addressing confidentiality in a way that works for your participants. Confidentiality in research means that information taken from participants will not be disclosed without their permission and that findings will be

presented in a way that does not disclose their identities (Wiles, Crow, Heath, & Charles, 2008).

Given the personal nature of the information that was shared with me and the small size of the

permanency planning community in BC, it was extremely important to me to do everything I

could to protect my participants' confidentiality. I honoured the requirements of my Research

Ethics Board (REB) approval, which included following Chapter 9 of the Tri-Council Policy

Statement on Ethical Conduct for Research Involving Humans (Appendix E); however, there

were many additional measures I put into place. For example, several of my participants

requested that their interviews take place in public places such as restaurants and cafes. In those

situations, I went to the venue ahead of time to find the most private place to meet, I let the staff

know that I was conducting an interview and would prefer a private table, and I checked in with

each participant periodically during the interview to make sure she was comfortable with

continuing. I was also very mindful of confidentiality while discussing my findings. There were

several instances where I chose not to include a particular quote or piece of information because

I worried that to do so would identify a participant. One way I see the issue of confidentiality

arising in the future involves the potential for me to see a participant in public. In those cases, I

will let the other person guide how the interaction unfolds.

Decolonization and accountability. Values around accountability to others must also be

upheld in Indigenous research. Ultimately, the people who are involved in the research must

benefit from the research (Kovach, 2009) and the knowledge gained from the research must be

transferred to them in a way that they can understand and that will be useful to them (Tuhiwai

Smith, 1999; Wilson, 2008). Within an Indigenous research paradigm, accountability often takes

the form of decolonization. Particularly given the colonial history of academic research and

Indigenous people, it is important that Indigenous research be an agent of decolonization, not

only for the individual, but also for the larger communities. Indigenous research must by necessity make a difference in people's lives, "not as an afterthought or as a separate applied step, but as a function of the entire research process" (Wulff, 2010, p. 1291). Decolonizing research puts Indigenous voices and epistemologies in the centre of the research process; examines the underlying assumptions that inform research; challenges the beliefs that Western methods and ways of knowing are the only true science; centres Indigenous voices; and follows Indigenous protocols (Simonds & Christopher, 2013).

Given its focus on deconstructing Aboriginal and Western relations, Métissage is inherently decolonizing in nature. In the words of Donald (2012):

> I am convinced that the task of decolonizing in the Canadian context can only occur when Aboriginal peoples and Canadians face each other across historic divides, deconstruct their shared past, and engage critically with the realization that their present and future are similarly tied together. (p. 535)

In addition, on a very personal level I would argue that Métissage is decolonizing research. The very fact that I can enter an academic institution and think critically about what it means for me to be Métis and how that might genuinely inform my research, resulting not only in growth for me but also for my fellow Métis community members, is decolonizing. It stands in direct contrast to some of the traditional Western academic research frameworks that have disempowered Aboriginal researchers by dictating how research must be done.

Cultural safety. Culturally safe research is essentially research that is done in an inclusive, anti-oppressive way from start to finish. It requires researchers to reflect upon their cultural identities and to understand how their values and beliefs might impact their research (Wilson & Neville, 2009). As well, researchers require an understanding of the socio-political

realities of their participants so that they can avoid stereotyping as well as produce research that is beneficial to the people being researched. When culturally safe practices are used, research participants feel genuinely included and respected and they have trust in the researcher regarding her research practices and around the dissemination of results (Wilson & Neville, 2009).

It was important for me not to make assumptions about the cultural identities of my participants and, instead, to be open-minded, curious, and sensitive. Within the first several questions of my questionnaire, I had the opportunity to elicit from my participants information regarding how they view their cultural identities and how that informs their lives and to the best of my ability I asked for this information in a way that was respectful and that guided me in conducting my research with that particular participant in a culturally safe manner.

Do No Harm. Given the sensitive nature of my topic, it was very important to me that I do no harm with this research, either to my participants or to my potential audience. There was a likelihood that discussing the intersection of colonization and transracial adoption would trigger negative feelings in some social workers and so I attempted to ensure that I had a safety net in place to help them debrief their feelings. In my Information Sheet (Appendix C) and Consent Form (Appendix D), I provided information regarding possible counselling options. Also, during my interviews and follow-up emails, I tried to genuinely connect with my participants so I would know if they were triggered by our conversations. There were no instances where I felt like a participant was triggered and in at least 4 cases, my participants told me that our conversation had offered them closure and/or an opportunity for much-needed critical thought and discussion. It is difficult to gauge the potential impact on those who will read my research following its publication. In order to minimize potentially negative impacts, I have tried to

present my research with transparency, humility, and authenticity and to be open to the fact that people may not agree with me.

Beneficence. Mertens and Ginsberg (2008) state that beneficence is the most fundamental ethical question of all. Researchers must ask themselves if the benefits of their research will outweigh the risks to the participants and the groups they represent. I feel that my research poses more benefit than risk to my participants and their communities. I believe that both non-Indigenous and Indigenous social workers will benefit from learning more about their individual and shared experiences and that this information has the potential of increasing solidarity and decreasing stress and burnout in the workplace. Additionally, I have been surprised by the lack of research on the topic of Indigenous social workers and I have sadly observed my Indigenous co-workers struggle and sometimes burn out in the field, in part due to the lack of sensitivity, knowledge, and care that is required to support them. I strongly feel that more research needs to be conducted in this area so that supports can be provided.

Rigor. Mertens and Ginsberg (2009) draw an interesting link between ethical research and rigor, saying that one of the prime hallmarks of ethical research is research that is also rigorous in nature. In the next section, I will discuss my evaluative criteria, which includes the concept of rigor.

Evaluative Criteria

Northcote (2012) points out that there is an irrefutable link between epistemology (i.e. what is considered knowledge and what can be counted as legitimate knowledge) and research methodologies and strategies, including the evaluative criteria that are chosen to ensure that the research has been conducted in a way that is "good". I would argue that the axiology (your values as a researcher and the actions that reflect those values) also impacts your choice of

evaluative criteria. In keeping with that thought, I chose the evaluative criteria identified by Cohen and Crabtree (2008) after reflecting on widely-held Indigenous philosophical assumptions as well as my own beliefs. I particularly looked for criteria that allowed for the elements found in the ethics section of this proposal, including relationality, decolonization, use of self, cultural safety, and Indigenous control.

Cohen and Crabtree (2008) conducted a content analysis on numerous health-related journal articles and identified seven criteria for evaluating qualitative research: 1. Carrying out ethical research, 2. Importance of the research, 3. Clarity and coherence of the research report, 4. Use of appropriate and rigorous methods, 5. Importance of reflexivity or attending to researcher bias, 6. Importance of establishing validity or credibility, and, 7. Importance of verification or reliability. I will discuss each of these below and will end with an honest look at the limitations of this research project.

1. Carrying out ethical research. In the previous section, I discussed the ways in which I did my best to ensure that this research was carried out in an ethical manner. In order to avoid redundancy, these will not be repeated here.

2. Importance of the research. I was initially unsure whether other social workers would share my belief that my research topic is interesting and relevant. Prior to beginning my data collection, I discussed my research plans with many friends, colleagues, and Aboriginal stakeholders and allies. As well, I presented my research proposal at two conferences. I felt very encouraged after seeing people's interest and enthusiasm. During my data collection process, I again felt encouraged by my participants' responses. Several indicated that the interview had given them a much-needed opportunity to discuss important topics like identity

and adoption. One said it had offered her the closure she needed after leaving the position. Each one indicated an interest in reading my findings.

3. Clarity and coherence of the research report. My goal has been to create a dissertation that is written clearly and coherently, using language that makes it understandable to people with a variety of backgrounds. Because social workers across the globe describe many shared experiences, I believe that this research may be of interest to people outside of BC; therefore, I have also tried to provide enough background information to help readers from outside areas understand the BC context.

4. Use of appropriate and rigorous methods. Creswell (2007) notes eight strategies that researchers can use to increase the rigor of their research and suggests that they engage in at least two of them. I chose these five: prolonged engagement, triangulation, peer review, clarifying researcher bias, member checking, and a rich, thick description.

Prolonged engagement. I feel that I demonstrated prolonged engagement on this topic. I have worked in the field of social work for 19 years, 17 of those in adoptions. Throughout my career, I have invested my time in building relationships with DAA and MCFD social workers, discussing topics such as workplace stress and colonization with them. In addition, through conducting my interviews I was able to add another, more formal, layer to that engagement. Finally, I have endeavoured throughout my life to increase my understanding of both my Métis culture and other Aboriginal cultures.

Triangulation. Although triangulation originally involved collecting data from multiple sources, it is now understood to involve multiple data, methods, analysts, or theories (Barusch, Gringeri, & George, 2011). I used triangulation in my research by collecting data from various sources (literature review, interviews with key informants and managers, interviews with social

workers, as well as the reflections from my journals), by ensuring variety in my sample (social workers who are employed in a variety of social work settings in urban and rural communities of different sizes in different areas of the province) and by using different theories (i.e. using Métissage to braid together Indigenous and Western frames of reference).

Peer review. As stated previously, while I was still in the planning process for this project, I sought and received feedback from five Aboriginal stakeholders and two non-Aboriginal allies; in addition, I presented my proposal at two conferences and requested feedback from attendees on my research plan. I also debriefed my research with two peers who are experienced and knowledgeable both in the areas of social work and research. I requested that they both provide me with critical feedback regarding my research and then, following our conversations, I journalled their feedback. Following the completion of the first draft of my dissertation, I had a colleague review the entire document and provide me with feedback and I made changes accordingly.

Clarifying researcher bias. Although I have described some of the benefits of my familiarity with this topic, it is also important for me to note that I brought biases to this work. There is a saying in the field of social work that each social worker is her/his own primary tool. Within qualitative research, this statement also holds true, placing the onus on the researcher to acknowledge her/his biases and the fact that they cannot help but be threaded throughout the research.

My biases can be found throughout this research. For example, I suspected that all social workers experience cognitive dissonance and that Aboriginal social workers are more knowledgeable than non-Aboriginal social workers regarding issues of colonization and will therefore be more negatively impacted by their work. I cannot deny that, although I experience

cognitive dissonance regarding the work that I did in placing Aboriginal children for adoption transracially, I do believe that this work is necessary and generally provides children in care with a better life than they would otherwise have experienced. I believe that children have the right to grow up in a family where they experience a sense of belonging and that they should consistently be loved and nurtured by one or two primary caregivers, ideally in the context of an extended family unit/community. I believe that culture is a lived experience and cannot be taught; however, I also believe that families can, with love, support, and guidance, provide a foundation for children to grow up connected to the cultures of their families of origin. I also believe that Aboriginal communities will continue to recover from the travesty of colonization and in time will completely take back responsibility for their children.

Member checking. I used member checking in a number of ways. First, I provided my participants with a copy of the interview guide prior to each interview. Secondly, following my transcription of each interview, I sent a copy of the transcript to the participant to verify that I had correctly captured her information and to give her the opportunity to delete/add/clarify information. Four of my participants requested follow-up conversations, which provided me with additional information that I included in my data. Thirdly, following the completion of the first draft of my dissertation, I sent a copy of the entire document to one of my participants for her review and I made changes as per her recommendations. Finally, I sent copies of my themes and sub-themes to all of my participants, requesting feedback regarding whether or not they experienced a sense of resonation with my findings and offering them the opportunity to provide further information/clarification. I gave my participants two weeks to respond and was pleased to have 11 of my participants follow up with me. Seven said they felt I had accurately captured what they had shared with me. One asked follow-up questions to clarify the meaning behind

some of the themes. Three said they felt the themes painted an overall accurate picture, with some of the themes resonating for them while others seemed relevant to other social workers' experiences.

Rich, thick description. I obtained a rich, thick description from each of my participants, allowing flexibility in my interview for them to discuss whatever came to mind. I transcribed my interviews personally, ensuring that I captured the "ums" and "ahs" of the conversations as well as used punctuation carefully because I feel that all of the details provide context and depth. In Chapters 4 and 5 I presented the data in a way that is as detailed and rich as possible, using quotes wherever feasible in order to capture the depth of my participants' experiences.

5. Importance of reflexivity. Reflexivity refers to the researcher being "conscious of the biases, values and experiences that he or she brings to the qualitative research study. Typically, the writer makes this explicit in the text" (Creswell, 2007, p. 243-244). Especially given the fact that I am so connected to this research topic on many different levels, it was important that I engage in a process of reflexivity. I purchased a journal when I began my doctoral degree and when that one was full, purchased a second one. Both were used to write down ideas and reminders, reflect on issues I was struggling with, and jot down notes during meetings. The information included in my journals changed as my research unfolded. For example, at the beginning of the process, I brainstormed ideas regarding my research topic/questions and towards the end I was making notes regarding themes and ideas for future areas of research. As stated previously, I also have a few peers who I trust to hold me accountable regarding my work and I debriefed with someone approximately once per month throughout this process.

6. Importance of establishing validity/credibility. Qualitative researchers view validity differently than quantitative researchers: rather than asking whether or not the researcher is

measuring what she/he wants to measure, they look at the integrity of the data collection and analysis (Alston & Bowles, 2013). Creswell (2007) discusses the fact that qualitative researchers strive for "'understanding', that deep structure of knowledge that comes from personally visiting with participants, spending time in the field, and probing to obtain detailed meaning" (p. 201). He points out that during or after our research, we ask ourselves whether or not we got it right, but, in reality, there are no "right" stories, just multiple stories that result in more questions rather than in endings. Still, it is important that qualitative researchers accurately reflect what participants said and for that reason, it is important to demonstrate methodological integrity regarding the credibility of the research.

Patton (2002) describes three elements that are related to credibility: rigorous methods, the credibility of the researcher, and a philosophical belief in the value of qualitative inquiry. Previously, I described how I endeavored to conduct this research with rigor. I believe that I am credible as a researcher because I am very familiar with this topic and because I have openly and reflexively acknowledged my biases. I also have a basic philosophical belief in the value of qualitative research, including naturalistic inquiry, inductive analysis, and holistic thinking. I hold these beliefs from the standpoints of the various roles I have in life, including that of a Métis woman, a social worker, a mother, and a student researcher.

7. Importance of verification/reliability. Qualitative researchers also view reliability differently than quantitative researchers. Rather than trying to ensure that the results could be replicated, they try to find exceptions to their results or transparently note all possible sources of error (Alston & Bowles, 2013). I addressed this issue in my research in a variety of ways. I attempted to be very clear about the steps I took in my research and to follow similar steps with each participant. I used a high-quality recording device to record my interviews and took notes

directly after each interview. As stated previously, I ensured that the transcriptions reflected the pauses and filler words used by my participants because these can sometimes change the meaning and intent of what has been expressed.

Limitations

There are numerous limitations inherent in this research project. To begin with, due to my relatively small sample size, my findings are not generalizeable to the larger population. Patton (2002) writes that "while one cannot generalize from single cases or very small samples, one can learn from them – and learn a great deal, often opening up new territory for further research" (p. 46). It is not the goal of this study to generalize to all social workers in BC but, rather, to learn more about the experiences of the social workers in my sample and to present this information in a manner that would encourage my readers to think about social work and cognitive dissonance in a deepened way. With that being said, my sample size represents a larger percentage of the overall population than one might assume. For example, I interviewed seven social workers who are currently employed by MCFD in adoption/guardianship positions out of a total of approximately 68 social workers employed by MCFD in those positions overall (Representative for Children and Youth, 2014). So although my findings cannot be generalizable to the larger population, I do believe that what my participants shared with me can provide a great deal of insight into the experiences of permanency planning social workers and even of people employed in other areas of social service and related helping professions.

My sample was more homogenous than what I had wished for. For example, there are no men in my sample, nor are there Aboriginal social workers currently employed by MCFD. Because there has been no research conducted on this topic, I had to base my literature review on related information and infer links to my research topic. This process has been somewhat

subjective and therefore open to researcher error. There are also possible limitations in the data I acquired from my participants, in the construction and use of my interview guide as my primary tool, in my ability to use the tool effectively, and in the fact that my participants were self-reporting their experiences. Finally, this research study was designed to provide insight into the experience of cognitive dissonance and, as such, does not provide a political analysis on the topic of transracial adoption.

Operationalizing my Research Design

In the previous pages, I described my research design, including anticipated and experienced ethical considerations. The remainder of this chapter will be devoted to a description of how I carried out this plan.

Sampling strategy. My criteria for my sample were as follows: social workers who are or were employed by MCFD or DAAs in BC where transracial adoption plans for Aboriginal children are facilitated in some way. Previously, I discussed the process by which approval is obtained to place Aboriginal children for adoption transracially. Although I initially planned to only interview the guardianship and adoptions social workers involved in this process, I quickly realized that one important group had been left out: social workers employed by the DAAs that are responsible for issuing the letter of approval that goes to the Exceptions Committee in order for these placements to be approved. In many ways, these social workers have the final say in whether or not these adoptions take place, resulting in a high potential for dissonance, and so I chose to include their voices in my research as well.

Creswell (2007) notes that qualitative researchers may use one or more sampling strategies in a single study as a way of maximizing differences and increasing the likelihood that the findings will reflect differences or different perspectives. My goal in recruiting my sample

was to give representation to as many diverse voices as possible while still obtaining an adequate sample size. I felt that giving space to social workers from diverse backgrounds and experiences would add to the depth of my research; however, because social workers are a somewhat homogenous group, I realized I would need to be intentional if I was to recruit a diverse sample. For that reason, I chose several strategies, including criterion, convenience, and snowball sampling, in order to recruit my participants.

Criterion sampling allows "all cases that meet some predetermined criterion of importance" to be included (Patton, 2002, p. 238). After receiving permission from MCFD to conduct this research (Appendix F), the Provincial Director of Adoption in BC acted as my gatekeeper, sending letters of invitation to all deputy directors employed by MCFD who oversee adoption or guardianship social workers as well as to the executive directors of the DAAs delegated to do permanency planning work. The MCFD directors were asked by my gatekeeper to forward my letter of invitation, via email, to the MCFD front line social workers in their regions. The DAA directors, on the other hand, were asked to choose whether or not to forward my email on to their front line social workers so that they could act as gatekeepers for their own agencies.

I was unsure how many responses I would receive through an emailed letter of invitation, so I also used convenience and snowball sampling. Convenience sampling involves researchers contacting members of the population who they can somewhat easily access. In my situation, I was able to contact colleagues who had previously worked in adoption or guardianship positions. Snowball sampling refers to researchers beginning with one or two participants and then building their sample by contacting potential participants that are suggested to them (Carey, 2012). I used private contact information to reach out to some of my colleagues and then used snowball

sampling with both the participants gained through criterion sampling and those gained through convenience sampling. Both Hart (2009) and Kovach (2009) describe how using relationships to build your research sample is consistent with an Indigenous approach. I confirmed with my participants via the information sheet and informed consent that they were speaking from their own perspectives rather than from the perspectives of their organization.

Participants. My sample consists of 21 women. As stated previously, the community of social workers in BC who facilitate permanency plans for children in care is quite small and the information they shared with me is quite personal. For that reason, my goal in describing these women is to provide my readers with context around the stories they shared with me without revealing information that will disclose their identities.

The women in my sample were located in 11 different communities in BC. Four of these communities have a population of fewer than 10,000 people, three have a population of between 10,000 and 50,000 people, and four have a population of over 50,000 people.

Of the 21 women, 10 were Aboriginal and 11 were non-Aboriginal. At times, self-identity arose as a somewhat complex issue for this group (i.e. having both Metis and First Nations heritage); however, generally speaking, 7 self-identified as First Nations and 3 as Métis.

The women ranged in age from late 20s to 60s; however, the majority (16) were in their 40s or 50s. I believe there are two reasons for this concentration. First, permanency planning positions are not generally entry-level positions and experienced social workers are often employed in these jobs. In addition, experienced social workers possibly feel more comfortable sharing their views than their less experienced counterparts and would therefore be more likely to respond to my letter of invitation.

These women had a variety of educational backgrounds: each one had an undergraduate degree (16 had a BSW), 4 had two undergraduate degrees, and 7 had a master's degree. As well, each one had received additional training (i.e. diplomas, workshops, conferences, delegation training). I believe that my sample is more highly educated than what one would generally find in a random sample of 21 social workers, perhaps due to their relative experience, age, and workplace positions. In addition, based on what my participants shared with me, I believe that social workers with extensive education are more likely than their counterparts to volunteer to participate in research because they value and can relate to academic pursuits.

All but one of the women self-identified as a social worker; this woman has been included in the sample as an outlier for two reasons. First, due to the history of social work and Aboriginal people, many choose not to self-identify as social workers in spite of the fact that they perform social-work type duties. Second, this woman does the same permanency work as other women in the sample and I felt that it was as important to include her voice as theirs. In my findings section, she is identified in the same way as I identified the other women in my sample (i.e. as a social worker), in part to protect her identity and in part because she performs the same duties as the other women in my sample who self-identify as social workers.

Although they held a variety of jobs both before and after entering social work, all of the women performed front-line child welfare duties. Nine of the women had only worked for MCFD (some of this group had also worked for another provincial child welfare authority), six had only ever worked for DAAs, and six had worked for both DAAs and MCFD or another provincial child welfare authority. Of the nine who had only worked for MCFD, all were non-Aboriginal and of the six that had only worked for DAAs, all were Aboriginal. Of the 21 women, seven were in managerial positions (i.e. team leaders, managers, directors), 11 were in front-line

positions, and three were not currently employed in the field of social work. Although their years of experience were interrupted by events such as maternity and education leaves, on average they had practiced social work for 16 years and only four had fewer than 10 years of experience.

All of the women had done work that involved transracial permanency planning for Aboriginal children. It is difficult to capture the extent of that experience. Particularly in rural areas, this work was historically done in addition to a variety of other duties (i.e. child protection) and many of the women described doing bouts of permanency in the midst of more crisis-oriented work. In addition, the field of social work is inherently fraught with change. Some of the women in my sample described fairly straight-forward careers in which they had worked for long periods of time on specific types of work; however, more often their careers had involved a meandering history of evolving positions, geographic contexts, and intentional job changes, all punctuated by life events such as educational and maternity leaves.

Data collection. I used semi-structured interviews as my primary data collection tool. I chose this tool for several reasons. To begin with, I was attempting to explore a fairly intricate topic through this research and I was therefore seeking quite specific information from my participants: I feel that semi-structured interviews helped me to focus our conversations so that I could explore my research topics within the timeframe I had with each participant. At the same time, I felt it was important that there be flexibility in my data collection method so that participants could genuinely share their experiences. Semi-structured interviews allow for the collection of rich, varied data and are adaptable and flexible (Carey, 2012). Finally, given the intricate nature of my research questions, I did not feel that it would be easy for me to acquire the information I was seeking; therefore, I felt it was very important that I use a data collection tool

that I am skilled in using. My primary tool for 17 years was the semi-structured interview; I am trained to use this tool and I have had the opportunity to develop a strong skill-set around its usage. In addition, given that my participants were other social workers, I felt that it would be an added benefit that they would likely have some familiarity and comfort with being interviewed.

One of the dilemmas I faced in conducting this research was how to go about finding evidence of cognitive dissonance in the stories of my participants. Although I considered beginning each interview with a short summary of the theory of cognitive dissonance, I worried that to do so would be leading and would potentially change the interviews from semi-structured, casual conversations to didactic lessons in social psychology. Instead, I chose to ask questions that focused on conflicts between values, beliefs, and behaviours.

I generated my interview questions based on my understanding of Festinger's (1957) Theory of Cognitive Dissonance and my experience as a permanency planning social worker. I then piloted this interview guide (Appendix B) with a friend who was formerly an adoption social worker and who continues to be employed in the field of social work. I chose her because she is a bright person, she is particularly adept at critical thought, and I know her to be someone who is comfortable giving her opinion. She provided me with several suggestions regarding how I could clarify my questions; however, for the most part I found that the questions did generate the information I was seeking.

Relationship-building is an important component of Indigenous research and it was one of my primary goals to connect with each participant in a genuine way and to allow the interview to unfold like a natural conversation while at the same time ensuring we covered the interview questions. I endeavored to build relationship in a number of ways. To begin with, I connected with each participant via email and/or text before the interview, both to send a copy of the

research questions and to ensure that she had a way of connecting with me if she had questions and/or if she was no longer able to participate. I chose to send each participant a copy of the questions before the interview because I felt that the questions were somewhat complex and if a participant was the type of person who felt most comfortable when able to think things through beforehand, I wanted to allow for that possibility. I asked each participant to feel free to choose whether or not to read the questions before we met. I also provided a copy of the questions during the interview. I had a variety of responses, ranging from my participants reading the questions before we met and making notes to participants requesting that I simply read the questions out loud during the interview. I did my best to ensure that the interview would take place in a setting that was convenient and comfortable for my participants and offered to meet at the time and place that worked best for each one. I conducted the interviews in my office, their offices, cafes and restaurants, and their homes. I interviewed 19 of my participants face-to-face in their communities and two of my participants over the phone. As stated previously, I gave each of my participants a gift and thank-you card to show my appreciation. I connected with several of my participants via phone and/or email after our interviews. A few had questions unrelated to my research that had arisen during our conversation and I followed up after the interview with that information. Three expressed that they had really enjoyed the opportunity to connect with someone like-minded about issues such as adoption and identity and they requested follow-up conversations, which took place via phone. I also connected with several of my participants via email after they had read through their transcripts. After each interview, I made notes in my journals of any thoughts/questions that had arisen from what my participants had chosen to share.

At times it was difficult to keep my data completely secure (i.e. when travelling away from home for interviews). However, I did my best to ensure that it was secure under different circumstances. I assigned a number to each participant in order to protect her identity. Electronic files were stored on a USB key and on my personal computer using a secure log-in, password protection, and anti-virus software. During the study, the numbers identifying each participant as well as my recordings, hard copies of my transcripts, my field notes, and my USB keys were stored either in my locked office at UNBC or in a locked briefcase, in a locked room, in my personal residence. When I travelled, I kept my tape recorder and USB key in my locked briefcase, either in my locked vehicle or in my locked hotel room. Following completion of the research project, all paper copies will be shredded, audio recordings will be deleted, and electronic files will be deleted from my personal computer. A password protected electronic copy of the data will be stored on my UNBC computer, which is a secure system with password protection. Five years after the study is completed, I will delete the stored electronic copy.

Data analysis. I chose thematic analysis to analyze my data, primarily because I felt that this strategy best fit the combination of my research questions and skill set. Thematic analysis centers on identifying themes and patterns regarding individual and group attitudes, behaviours, and values (Carey, 2012). Data is collected and then patterns of experience/attitudes emerge and are combined and catalogued into themes and sub-themes. I acquired a large amount of data through my interviews and thematic analysis allowed me to effectively identify the themes and patterns that emerged both within and between my participants' stories. In addition, because I have used thematic analysis extensively in the past 17 years (i.e. while writing home studies), I feel that I have a strong skill-set around its use and therefore I was able to maximize my ability to analyze the data. Patton (2002) states that one of the competencies required for thematic

analysis is pattern recognition, or the ability to see patterns in information that seems random. I feel that my use of thematic analysis has allowed me to develop the ability to decipher patterns as well as notice discrepancies in patterns.

Carey (2012) describes 6 steps to using thematic analysis in social work research: 1. Collect data, 2. Transcribe conversations, 3. Identify themes from patterns within the transcriptions, 4. Piece together the themes to create a comprehensive picture of participants' collective experience, 5. Build a valid argument for developing any themes (i.e. based on the relevant literature), and, 6. Apply findings to practice. I followed these steps; however, I also worked on developing my themes throughout the research process, not just following the transcriptions of my interviews. In the previous section, I described how I collected my data. In the following pages, I will describe how I carried out Carey's other 5 steps.

Transcribing conversations. I transcribed each of the interviews as a way to immerse myself in the data, using punctuation as a way to capture each participant's meaning as accurately as possible. I also included filler words such as "um" and indicated in parenthesis when a participant laughed or cried as a way of providing further context. I then read through the transcripts again to ensure I was familiar with them. I printed off a hard copy of each interview so I would have a visual and placed them in a binder. I also kept copies of the transcripts and interviews on a USB key for future reference. Some of my participants gave me other written information (i.e. a list of courses they have completed, a resume). After removing the identifying information (blacking out with a felt pen, photocopying, then shredding the original document), I included it in my binder with the relevant transcript.

Identifying themes. I identified themes using a theory-driven approach, drawing on the theory of cognitive dissonance. With a theory-driven approach, the researcher begins with a

theory of what occurs and then decides on what evidence will support that theory (Boyatzis, 1998).

As stated previously, I was coding responses to 3 questions: 1. Do social workers who facilitate transracial adoption plans for Aboriginal children experience cognitive dissonance and, if so, in what ways? 2. How does that cognitive dissonance impact social workers? 3. In what ways do social workers reconcile a sense of dissonance? For the first question, I began by noting that cognitive dissonance is "a state of tension that occurs whenever a person holds two cognitions (ideas, attitudes, beliefs, opinions) that are psychologically inconsistent" (Tavris & Aronson, 2007, p. 13). I kept in mind that a cognition can include a behaviour (i.e. Smoking is dumb…I smoke two packs a day"). When reading through each interview, I looked for times that each participant described an idea, attitude, belief, or opinion and noted that in the margin. I then looked for a time when she described an idea, attitude, belief, or opinion that was inconsistent with that original cognition. Whenever there were two inconsistent cognitions, I noted it as a finding.

For the second question, I spent some time thinking about indicators of "impacts" and chose to use the medicine wheel with its four quadrants: physical, mental, spiritual, and emotional. I read through some literature on medicine wheels until I came across definitions for these four quadrants that would offer some structure to my thematic analysis. I then combed through each interview with that definition in mind, looking for expressions of impacts that fit within either the physical, mental, spiritual, or emotional categories.

The third question was the most difficult because I had to keep in mind that there are three primary ways of reducing dissonance: 1. They change their behavior to bring it in line with the dissonant cognition, 2. They attempt to justify their behavior through changing one of the

dissonant cognitions, or, 3. They attempt to justify their behavior through adding new cognitions (Aronson et al., 2007). I had to keep in mind that both of the latter methods of reducing dissonance involve adding a thought or cognition; however, #2 involves adding a cognition that directly involves one of the dissonant cognitions whereas #3 involves adding a completely new cognition that does not directly involve one of the dissonant cognition. To use my previous example, a smoker who feels dissonance over smoking (I am a sensible person…smoking is foolish) can change his behaviour (#1), tell himself he is smoking a low-tar cigarette and so his smoking is not that foolish (#2) or tell himself smoking helps him lose weight and therefore helps him stay healthy (#3). When coding themes around dissonance reduction, I looked at instances where a participant expressed dissonant thoughts/values/behaviours in our interview and then, either at that point or somewhere else in the interview, expressed a justifying/minimizing thought that involved one of the dissonant cognitions or introduced a completely new cognition.

Building a comprehensive picture. Following the transcription of my interviews, I had an enormous and somewhat overwhelming amount of data: over 600 pages. Initially, I planned to code my themes by reading through the hard copy of each interview and making notes in the margins; however, after coding one interview I realized that this method was too confusing and could result in the loss of important information. After consulting with a colleague knowledgeable around thematic analysis, I changed my method to one that would allow me to organize my data into more manageable sections. I began by creating 3 Word documents, in 3 different colours, one for each of my research questions: 1. Do social workers who facilitate transracial adoption plans for Aboriginal children experience cognitive dissonance and, if so, in what ways? 2. How does that cognitive dissonance impact social workers? 3. In what ways do

social workers reconcile a sense of dissonance? Then, I combed through each interview, looking for quotes that fit with any one of those sections. I highlighted the quote in the relevant colour, then copied and pasted the quote into the applicable document, including the participant's identification number in each quote. Sometimes a quote was relevant to more than one of my questions and in those cases I pasted it to both documents. Due to that overlap, at the end of this stage I was left with three Word documents totaling a greater number of pages than what I had begun with; however, each question felt more manageable than it had previously because I could focus on one at a time.

I then proceeded to look for themes and sub-themes in each of my 3 Word documents. I find that I am most thorough when reading a paper copy, so for this step I printed off the entire document and read it through very carefully, writing relevant themes in the margins. I inductively came up with names for the themes based on what I felt the participant was, in essence, trying to communicate. The majority of themes came up frequently enough for me to quite easily recognize the similarities. In some cases, I renamed a theme when I found that a participant had voiced a similar thought that was not quite accurately captured by the thematic name I had previously chosen. Once I had identified the sub-themes, I went into the Word document and typed those themes in parenthesis at the end of the relevant quote. Next, I made a list of the sub-themes at the top of the Word document and then cut and pasted the relevant quotes so that they would be clustered together under the relevant sub-theme heading. Again, at times this step resulted in an increase in the overall number of pages because a quote might fit under more than one sub-theme; however, the data continued to feel increasingly more manageable as the themes and sub-themes emerged.

At that point, I made a list of the sub-themes so that I could carefully consider how they might relate to one another and be clustered together in my findings section to add to the cohesion of my final report. As I read through the quotes and my list of sub-themes, I could see how some belonged together under a larger heading. In some cases, that process was somewhat inductive and in others it was more deductive. For example, when looking at themes regarding how my participants are impacted by cognitive dissonance, I deducted from my understanding of wellness that there could be mental, physical, spiritual, and emotional impacts and that these headings could offer some structure to that section. However, when I was discussing how my participants reconcile the cognitive dissonance, choosing the heading, "philosophizing about meaning, intent, and choice" occurred quite inductively after I had read through the quotes numerous times and asked myself what was at the core of the dissonance reduction. At that point, I went into the Word document and clustered the sub-themes into sections under those headings. To use the above example, "I am doing my best", "My plan is better than the alternative", "I can bring about change from within", "I am more capable than others", and "I accept that this work is difficult" were clustered together under the heading, "philosophizing about meaning, intent, and choice".

I did not specifically track the number of times that each sub-theme arose; however, I did maintain an awareness of how often it came up both within a given interview and across interviews as well as how emphatic my participants were when discussing it. Because I had included the participant number along with each quote, I could see whether or not a sub-theme was being mentioned numerous times by one participant or once by numerous participants. When a sub-theme was obviously very predominant, I made the decision to count how many times it had arisen as I felt this information was important to my findings. I was concerned

regarding how I would manage a sub-theme that occurred infrequently; however, I found that most findings came up several times at a minimum, making it a fairly easy decision to cluster them into a theme and include them in my discussion. In a few situations, a point was only made once or twice and I had to consider whether or not it was worth including. In those situations, I weighed out how emphatically my participant had discussed that sub-theme, how it fit into the larger context of my research, as well as whether or not it was so different from my other findings that it should be included as an outlier, consistent with Patton's (2002) claim that it is important to look for inconsistencies within the data.

Finally, for each question I wrote up my findings, including relevant quotes in each section to support and explain my findings. I felt that the information shared with me was incredibly powerful and many times it brought tears to my eyes. For that reason, I chose to include as many of my participants words as possible. In order to provide some context for my participants' experiences while still protecting each person's identity, I chose to follow each quote by identifying whether or not the participant was currently/most recently employed by a DAA or MCFD as well as whether or not that participant self-identified as Aboriginal or non-Aboriginal.

I put several measures in place to help ensure the consistency and rigor of my codes. First, throughout this process I kept a reflexive journal in which I noted some of my thoughts and biases in order to heighten my awareness regarding how these might impact my code development. Secondly, I kept a code book in the form of a list of codes that I changed and adapted as needed. Finally, as part of my audit trail I kept paper and electronic copies of all of the Word documents that I created while analyzing my data.

Building a valid argument for developing any themes. Although I understand that within qualitative research there is an acknowledgement that it is impossible to code data in such a way that you will end up with the "truth", it was very important to me to honour my participants' stories by doing my very best to give voice to what they had chosen to share with me. I came to envision this process as occurring in two different ways. First, I wanted to ensure that, to the best of my ability, I had captured the themes that arose between my interviews. I feel that I accomplished this step by taking my time in conducting the thematic analysis, by leaving an audit trail so that I and others could decipher how I came to my findings, by engaging in self-care throughout the process so I would have a clear mind, and by reaching out to others more knowledgeable than myself when I was unsure how to proceed. Secondly, it was also important to me that, to the best of my ability, I captured the most salient themes that arose in each individual interview. My goal was to honour the experiences of each participant by ensuring that the message that she had chosen to share with me was not lost in my cross-analysis of the interviews.

Applying findings to practice. In the next two chapters, I will outline my findings in detail and then discuss them. As stated previously, I used as many relevant quotes as possible because I believe that using direct quotes empowers participants, brings a "realness" to the research findings, and gives the final research product the quality of a story. I feel that the use of story can be decolonizing in research and keeping stories as intact as possible can ensure that participants are heard "in their own voice" (Kovach, 2009, p. 131). In addition, when we reflect on Kovach's claim that maintaining the integrity of each participant's story lends to the validity of the research, presenting the data as much as possible in the participants' voices will help lend

to the methodological integrity. In the coming chapters, I will present my findings and then discuss how I believe they can be applied to practice.

Chapter 4: Research Findings

In this chapter, I will discuss the themes that arose from my interviews, organizing those findings around my three research questions: 1. Do social workers who facilitate transracial adoption plans for Aboriginal children experience cognitive dissonance and, if so, in what ways? 2. How does that cognitive dissonance impact social workers? 3. In what ways do social workers reconcile a sense of dissonance? A comprehensive table of themes can be found in Appendix G while tables for each research question can be found embedded in their respective sections.

Do Social Workers Experience Cognitive Dissonance and, if so, in What Ways?

As stated previously, I used Festinger's Theory of Cognitive Dissonance to explore this question, looking at the ways in which my participants described experiencing conflicting cognitions, which are described as any piece of knowledge they hold about the world, their environment, or themselves, including their behaviors, attitudes, or emotions (Cooper, 2012). I initially worried that it would be difficult to glean the specific information I was seeking through semi-structured interviews. In addition, I worried that it might be challenging to find examples of cognitive dissonance in my conversations with participants because one of the most basic goals of dissonance reduction is to help us forget: "At the simplest level, memory smooths out the wrinkles of dissonance by enabling the confirmation bias to hum along, selectively causing us to forget discrepant, disconfirming information about beliefs we hold dear" (Tavris & Aronson, 2007, p. 70). However, I find it significant that each participant not only quickly understood the basics of the theory but also how it surfaces in her work. It was not a matter of "can I find an example?" but more "where do I even begin?"

Prior to the interviews, the most obvious example that I thought might arise involved values/ behaviours around the need for a child to have permanency, safety, and attachment being

dissonant with values/behaviours around a child's need to grow up in family, community, and culture. While this theme was the most predominant in my interviews, my participants gave me other examples that were far more varied than I could have imagined. In spite of that diversity, the experiences of cognitive dissonance can be grouped into 4 broad categories: 1. Competing needs, 2. Personal versus systemic values, 3. Cultural connection and identity, and 4. Personal roles. These themes and their sub-themes are summarized in the following table:

Themes	Sub-Themes
Competing needs	• *Permanency versus connection* • *Safety versus connection* • *Attachment versus connection* • *Permanency versus foster care/aging out* • *Permanency versus community health* • *"Best interests" and competing needs*
Personal values versus organizational systems	• *Time to navigate organizational processes* • *Time to build relationship* • *Organizational politics* • *Organizational rules* • *Need for structure* • *Organizations that support Indigenous knowledge*
Cultural connection and identity	• *Identity* • *Cultural plans versus lived experience* • *Self-identification*
Personal roles	• *Being a social worker in a flawed system* • *Personal role in colonization* • *Being white*

Table 1: Themes and Sub-themes arising from Question 1

Competing needs. Each of the social workers I interviewed described experiencing dissonance when trying to decide the best options for the children she was tasked with planning for. They discussed the turmoil involved in weighing out competing needs and values around connections to birth family, community and culture (hereafter referred to simply as "connections") along with permanency, safety, and attachment. It is important to note that every participant expressed beliefs around the importance of each one of these needs being met in a child's life; however, there was variety in how much weight was given to each. I came to view these values as occurring at each end of a continuum in pairs: permanency versus connection, safety versus connection, attachment versus connection, permanency versus foster care/aging out, and permanency versus community health. Every participant fell in a different place along each continuum regarding which she felt should be prioritized in the planning for a child. Cognitive dissonance arose from the understanding that placing value on one need could often result in a life-changing loss for the child around the other need.

Permanecy versus connection. Every social worker in my sample described the dilemma around balancing a child's need for permanency with his/her need for connection to birth family, community, and culture. While each participant indicated that she highly valued both permanency and connection, some workers seemed to prioritize permanency somewhat more over connection:

> So, um, I mean, it's the lesser of two evils, right? They have their pit-falls but ultimately if children have developed a relationship with a foster parent… and we've looked for an Aboriginal home and we've gone to the community and there's nothing for these kids, then I'm on board with that then…I believe in permanency as being the ultimate goal – at any cost? Maybe not. But at many costs? Probably…and I think we have to strengthen

our ability to support non-Aboriginal adoptive families in having relationships with their

original communities or whatever but, um, that's where we kind of fall apart so I just

have mixed feelings every time I do it. (Caucasian MCFD SW)

Other social workers seemed to fall closer to connection than permanency on the

continuum:

Like…they're kids with special needs. They need a lot of nurturing. They need really

well educated, competent parents, and that's what these people were but it's like this

other stuff, you can't just ignore it, you know. It is a loss as well, so it's kind of like do

we keep them connected to the culture and the family and risk them getting drawn into

the negatives that are impacting their community or do we send them into this really

lovely family but then they lose their family and their culture? It's like, it's not obvious

to me that there is a benefit to either side. Like it's kind of a looking at fairly equal

concerns. But I know…the Ministry worker for the other kids and stuff they're all like

why are you even sweating this stuff? Of course they should be adopted. Duh. You're

not going to send them home to that reserve. There's glue sniffing there. There's sexual

abuse…and I'm like well I'm not going to read one Maclean's article and make a

decision about these kids' future. We need to build a relationship and do the

research…and that's going to take time. But they're like well why would you send them

there?...And I'm like (laughter) I'm not saying I'm going to send them there but we need

to involve them and talk to them and see what's going on. Maybe not everybody's a glue

sniffing pedophile. Maybe there's some good people there. (Caucasian DAA SW)

One social worker reflected on her involvement in a repatriation where a child was

moved from her prospective foster/adoptive home to her community: arguably a choice that

placed more value on connection that on permanency. That decision resulted in a great deal of resentment on the part of the child and in young adulthood she requested a meeting with the staff of the child welfare agency to discuss how it had impacted her:

But in the end when she was ready to make plans for college she held a meeting with all of our staff and with me in particular to let us know that we had harmed her. And that her views were not taken into consideration and that her First Nations family is not her family that she identifies with and in fact had only started identifying as First Nations maybe the year before by hanging out with the elders' group to play guitar for them every once in a while. But other than that, she was angry at her community for making that happen. And she didn't want anything to do with them. So it's, you know, I can go to a regret place and then I can go to the place of that's what I knew at the time. Um, it's hard to hear someone say you've hurt me. (Caucasian DAA SW)

Safety versus connection. The social workers in my sample also described having to weigh out their beliefs in the value of connection with their need to keep children safe. Woven through these conversations were concerns regarding the ability of communities to keep children safe. One Aboriginal social worker involved in permanency planning in her home community described the safety-related benefits of placing children off reserve:

They will have a better life, they will have more opportunities, they will be able to thrive and grow. They won't be exposed to all the stuff out on a reserve where, you know, there's shots being fired randomly across the houses and, you know, drugs and alcohol and all sort of stuff all over the place, right? Because that's where they were living, you know? And I acknowledge that leadership is doing their best to reduce a lot of that…but at the same time it's going to take a long time to unravel a lot of the stuff that is still

present there, right? It's like a lot of the violence and the sexual abuse and like all sorts

of stuff, right?...because I have kids of my own and I imagine them, like, you see little

toddlers running around and being exposed to all of that, whereas, you know, if they were

in a home, a safe home, and, you know, they had stability, secure attachment and, you

know, opportunities, and what-not, right? So...it's almost like you're being tugged in

different ways, right? (Aboriginal DAA SW)

One of my participants shared a troubling experience where her decision to place a child

in community rather than pursue an adoption placement resulted in the child being harmed:

Bad things do happen along the way and there is harm...Everybody has their piece of

wholeness that they're stepping into in this unfolding, decolonization work, this healing

work of all the generations that have had their identities harmed...so my one that (was

returned to birth mom) and everything that we set up there and it was all going

swimmingly well. She went out a second time. All was going swimmingly well. She

wanted to stay. Her mom was clean and sober...And, you know, who knows what

exactly went wrong but her mom fell off her game, disappeared. It was hard for me long

distance to know. Some of the partners that I had set up weren't staying on top of the

details and who knows what the community politics were that were preventing them from

going into the home and really finding out...my girl ended up getting sexually abused by

somebody else in the community...So huge learning there too on, like, what do you do to

create all of the insurances that are needed to ... bring reconnection (about). Um, you

know, don't be naïve because the protection piece still exists. (Caucasian MCFD SW)

Some of the social workers in my sample also pointed out that balancing out a child's

need for safety can be complicated by the fact that safety is not only a physical necessity:

My ultimate top rule is child is safe. That's number one rule. Then after that we can talk

about whatever. And even like, I'm even talking about cultural safety, too, so that's why

I struggle with adoption and stuff. It's safety of the child first, then everything else is

negotiable. (Caucasian DAA SW)

* * *

Um, well I've got some emotional days around here (laughter), right? I mean…there

have been a lot of (adoption) breakdowns and, um, there've been a lot of pain, there've

been a lot of hurt children. Hurt from their own families, I don't take away from what

their own families have contributed and that. Um, but they haven't gone on to any better.

Different, but not emotionally and psychologically, um, maybe physically better, maybe

on the scale of poverty better, um, but emotionally and psychologically, probably more

damaging in some ways. Um, and not a whole lot of different than a residential school.

(Aboriginal DAA SW)

Attachment versus connection. Weighing out values around permanency and connection

took on another layer for many of my participants when attachment was factored in, specifically

when the potential permanency plan involved a long-term foster placement:

And a great foster parent isn't necessarily a culturally-attuned foster parent. A great

foster parent is a foster parent that provides a child with a lot of love and then at one

point somebody decided to place an Aboriginal child there. They're still providing that

child with an incredible amount of love but they may not understand the complexities of

colonization, the importance of celebrating culture…and the fear of a legacy of

colonization doesn't mean they're not great parents. It just means that they don't

understand this in the way that they should. But 7 years ago we decided to place that baby there, so now what? (Caucasian DAA SW)

* * *

I think there's been different situations at work where a child's maybe placed in a home where their cultural needs are not being met and I feel like I have an obligation to really support that and it's in conflict when say the caregiver won't engage in that even though I've continually tried. Like I definitely think I … I probably compromise in my own head for the greater…you know, thinking…well, we'll take that on, we'll take the kids to the community events, but really not being able to get to the root of the issue and actually change it...So kind of you're damned if you do, damned if you don't. The lesser of two not so great situations where I think that definitely bothers me. (Aboriginal DAA SW)

* * *

I strongly believe in, you know, Aboriginal children growing up in their home community, home family, and, you know, immersed in as much culture as whatever is left (laughter)…That's where my values are. And , uh, but at the same time also recognizing, like it's almost like you're being pulled back and forth because I also recognize the fact that sometimes, you know, a child needs a home…parents or family that they can develop a healthy attachment to. (Aboriginal DAA SW)

Previously, the controversy regarding the application of Attachment Theory to Aboriginal children was discussed, with the predominant argument being that attachment is a Western construct that does not fit with some of the values of Aboriginal people such as a belief in shared child-rearing (Neckoway et al., 2007). I did not find that my Aboriginal participants discussed attachment in a different way than my non-Aboriginal participants; however, Attachment Theory

is a complex topic in and of itself and my interview guide was not designed to capture its nuances, largely because exploring the Theory of Cognitive Dissonance and Attachment Theory in one interview would be onerous for my participants. It is possible that different perspectives around attachment impacted where each participant fell on the spectrum between attachment and connection.

Permanency versus foster care/aging out. One of the most strongly and consistently-voiced values around planning for children involved a dislike of children growing up in and aging out of the foster care system:

You don't want your kids to stay in foster care. Oh my god. It's the last thing you want. (Caucasian MCFD SW)

* * *

A lot of the times it's just mortgage helpers…people are just packing foster kids in their homes to help out with mortgage payments. I'm, like, get an international student. A foster child, that's a child…Would you be willing to adopt this child and raise him? No? Well then forget it. Because you want that level of commitment. What if I take your cheques away?...Oh, I love them like they're my daughter. It's like my son. No, once we cut these cheques off you'll be calling me to come and get them. That's not love. (Caucasian DAA SW)

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It's my belief that all children deserve permanency and that includes First Nations children, too. You know, like they deserve it just as much as everybody. They're not, um, less than, that they don't deserve that, right? So…I think that would be the hard part for me is realizing, is that, um, bands that refuse to do any permanency for their children,

um…you know and, and they don't know the children, they have no idea what they look like or anything and they just make a decision that, you know, it's not going to happen and, you know, and that child is left in, you know, in a government system until they're 19 and they say…well is the foster family prepared to keep them? Yeah, but, um, that doesn't mean that 3, 4 years down the road that foster family gets cancer or gets sick or there's a death that that child goes to another system, you know? (Caucasian MCFD SW)

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When you think about kids ending up, um, you know, at 19 with nobody and you're watching these kids, their faces, how they dread their 19th birthday. It's just, it's horrible. (Caucasian MCFD SW)

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Nobody wants to be called a foster kid for the rest of their life. You don't want to age out and I don't think that's good for anybody, to age out of care and just have nobody, nothing. (Aboriginal DAA SW)

Although there was a consistently-shared value amongst my participants around foster care being damaging to children, some of the DAA social workers in my sample expressed a willingness to support a child staying in foster care when they factored in their values around a child being able to stay connected to community and culture:

And of course you're not going to want the kids to grow up in foster care if they're in a crappy home but it's, like, as I've been able to kind of, you know, be more involved in where the kids go, I feel better about it because some of them, you know, have moved to, not necessarily family because maybe family's unhealthy but I have one little guy and he's living with his former daycare provider and she's a First Nations woman and she knows his whole family and she knows how to keep him in touch with his culture and

everything and he's doing great there. So I wouldn't look at adoption for him, you know. He's going to grow up in care, but he's going to grow up with her...he still has contact with family and stuff, so it's a good situation. (Caucasian DAA SW)

Permanency versus community health. Earlier, it was described how many Aboriginal people do not separate the concepts of community identity and individual identity. Interestingly, both my Aboriginal and non-Aboriginal participants described how, when planning for children, they factor in the ways in which those children contribute to the health of their communities:

Some people felt it was, if I can just be really blunt with you, it was equivalent to being raped...sorry, you know, these children were being stripped from them. Along with the children would be what these children represented, which was building a community and a nation for them and, you know, having those, those feelings of, you know...we value our children not because they, like, the kind of Western European, we value our children because they reflect how great we are. That is not their concept. Their concept is we value the children because of who they are and we're so excited that they can take their, um, their place in leadership, take their place in having a name, they take their place in, um, you know, different clans or different groups depending on what that is...So that was a huge learning for me...there's always...flavours in terms of how they would emphasize...some people would be, like, you know, oh, no, it's fine, I don't mind that my child learns a totally different system. Other people would be, like, over my dead body...Ever...that was a lot to learn. (Caucasian MCFD SW)

"Best interests" and competing needs. As stated previously, the CFCSA, which guides the work of both MCFD and DAA social workers, states that the "best interests" of children must be one of the main considerations in planning for them and notes that factors such as a child's

safety, continuity, and identity must be considered. This section infers some definitive guidance regarding how social workers should weigh out needs such as permanency and connection. Several of my participants noted, however, that their desire to act in the best interests of the children they plan for conflicts with their own difficulty in deciding what is in the best interest and in the fact that others around them and the policies they work within often interpret things differently than they do:

> And that's the thing that I've heard this over and over and it's stuck with me forever and ever. If you don't have anything better to offer, then what the hell are you doing? And I get it, I get the need for protection but somehow the way that it's done around here, it's not realistic and it's not in the child's best interest, but everybody, um, sees the child's best interests in a different way…Let's worry about the child's safety and forget about everything else right now. Whereas I'm, like, let's hold on, let's put that all into perspective and into the bigger picture here because as soon as you disrupt that attachment in life, you're dealing with another layer and it's, like, how many layers do you want to deal with here?…There's no perfect world and why are we striving for that with kids if it's non-existent? (Aboriginal DAA SW)

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> It was very heart wrenching and I think that, you know, is heartbreaking to say the least. And it was like one of those moments where you're, like, you want the best for these kids but what does that look like? You know, and are we thinking the best in the short term, long term, you know? Maybe they'll stay in this foster home for 5 years and then we can slowly transition them back, but what if they want to stay there because they're developed that relationship, right? And that's what they know and that's what they've

come to know, and then we're making these decisions for them and it's, like, yeah, you know, as much as you want…to focus your attention on meeting their so-called best interests, it's, like, yeah, it's really kind of a grey area for me. (Aboriginal DAA SW)

Personal values versus organizational systems. 18 of my participants described situations where their values around how the work should be done came into conflict with the systems that guided how they could do the work. These conflicts occurred within their employing organization (internally) as well as through the planning that they were required to do with the other organization (externally).

Time to navigate organizational processes. The subject of time came up repeatedly during my interviews, with social workers discussing their value around timely planning for children conflicting with their need to navigate complex systems. Some social workers expressed frustration that the process takes so long, preventing children from having permanency:

> (The hardest part is) the work involved, once you find (an adoptive family). It's doing cultural plans, it's working with guardianship workers and other people that need to be involved…and there are stalls and stops along the way. Sometimes it's the family itself where you're requesting them to do certain things and paperwork drives it as much as we want to think anything else. Until certain things are done, you can't move to the next step. And that can take…7-10 years sometimes…and sometimes they don't even happen. The child ages out. You're still connected to what that possibility was but it just never came to fruition. So it's generally around that, the requirements of the paper trail. That's what stalls it out a lot of times. (Caucasian MCFD SW)

Other social workers, however, expressed frustration that the systems around them pressure them to rush their planning and/or do not take the time to plan properly for children:

And, um, and I was looking through the file and trying to figure out, like, has the band been consulted because…the Ministry worker actually told me, "The band's been consulted, they consent to adoption…don't worry about it, just sign off"…And I was, like, okay, well I still need to go through the file and…the band hadn't actually been contacted so I said okay, I'll just shoot off a letter to them. They probably won't reply because this worker is telling me that they don't reply and then we'll just move from there, right? At least we've done it. So I did up a letter…And they ended up calling me and they were like, "You know, we want to help plan for these kids. We're not supportive of this adoption plan"…Like, it's turned into this huge mess now and so the Ministry is all mad at me because they're like we told you that the band was consulted and I'm like the band was not consulted. But I think this…is like that kind of colonizing mentality coming through. Like, you're in it, you don't even know you're in it. They're like, "Well we've done our due diligence". It's like no you haven't. You haven't tried to talk to anybody, right? I just googled the band's name and sent out an email, or a fax that way. It wasn't complicated. It's not rocket science, but it's just making that extra effort. I find the Ministry doesn't really want to deal with the bands. They just want to, yeah we'll do a cultural plan and, you know, sign off on it, we'll get an exception from the band and then that'll be it. But part of it, too, is like they're still on those time-lines. They don't understand that a lot of these communities are not functioning at the same level that they are. They have different, you know, they have, sometimes they want to consult with more people, sometimes they want to take more time, sometimes, you know,

it's really chaotic and it's hard to get somebody that you can get an answer out of but they don't want to make allowances for these differences. (Caucasian DAA SW)

Time to build relationship. Consistent with the previous quote, the social workers in my sample also frequently mentioned conflicting personal values around timely planning versus the need to take the time to build genuine relationships. One Aboriginal social worker described going to her mom for advice around her planning for First Nations children and how her mom astutely pointed out that it is difficult to plan for a child when the time has not been invested in relationship building:

"Mom this is what I'm being asked to do", and she goes, "Well, I guess when it comes right down to it, where's the best place in your mind, where's the best place for those children?" And I said, "Well I don't know where they come from. I don't know that reserve". She said, "That's right, that's right, so how can you make an informed decision? … How can you make an informed decision about what's best if you don't even know the community? The kids don't know the community. They don't know who to call aunt or uncle or grandpa or grandma over there. Do you know them?" I said, "No, mom, I don't". (Aboriginal DAA SW)

At times, dissonance arose because the social worker was employed by an organization that did not support the time involved for true relationship building. One social worker described an experience she had while working for MCFD, before leaving that organization due to its values conflicting with her own:

So for example working at MCFD…I was asked to cover a caseload that…was connected to one of the First Nations communities and so I was asked to go out on an intake and I said, well I'm not going to do that, initially. Like, I have to have an opportunity to go out

and meet with their band social worker and hopefully chief and council and some pieces and it was, like, no you don't have time to do that. Like, go out and do it. (Aboriginal DAA SW)

Organizational politics. The social workers in my sample also described how their values around permanency planning for children at times conflicted with the driving politics around them. Given the notorious reputation that provincial and federal governments have for creating laws and policies that do not always fit with people's values, I expected to see this theme arise for the MCFD social workers. I was surprised to see that it arose as often, though differently, for the DAA social workers I interviewed. One First Nations social worker described the frustration involved in having to work with leadership that is not only unfamiliar with the child welfare system but also used to working under a traditional Aboriginal system, leaving her caught in the middle:

> Part of our cultural safety is to call the chief in. And the chief, he's on page one. And so he's, like, "Well why didn't you?" We tried that. "Why didn't you?" We tried that. So for the chiefs that come in so late in the game, you know, I'm already way over here, you know, and I understand it and then he brings me way back…He couldn't understand. Like, he's in a different mind-set because he's so used to, "I'm saying this, this is what you've got to do". To hearing, "The youth's saying that and we've got to do what"? (laughter). It's reversed…And that's a hard one because at the same time we still want the chief in the child's life but we don't want it to halt the child growing and we don't want him to, um, step on his rights but at the same time we still want him to stand beside. (Aboriginal DAA SW)

Another First Nations social worker described how, in spite of her own values that support transracial adoption, she felt like it was her cultural duty to support her community's leaders in their stance against these placements:

> I was, like, okay, I understand where they're coming from and so I really didn't have a choice as to how I, you know, viewed the situation. You know, I could kind of balance things and I would see myself as being a highly political person as well when it came to things like that and I always try to also understand some of the benefits or some of the, you know, I guess of all points of views but at the same time, you know, I firmly stood with the leadership and their wishes. (Aboriginal DAA SW)

Organizational rules. Conflicts between wanting to be creative in doing the work and having to follow the rules of the organization also arose as a theme. One Aboriginal social worker who left MCFD said of her time there:

> I don't really like linear processes and that's something I struggled with in adoptions like I felt like it was very, okay we do this, this, this and then it's done and that's it, where I think life it is circular and sometimes things need to come back to the table. That's why I really like family group conference processes and processes that allow everybody to engage. (Aboriginal DAA SW)

Need for structure. In contrast to the above-mentioned need for increased flexibility within organizations to engage in activities such as building relationships, my participants also spoke of their need for additional structure/guidelines around how they were expected to do the work. This issue seemed especially prevalent in the DAAs, where social workers are expected to do adoption planning in spite of the fact that doing so is somewhat taboo in some DAAs. One social worker employed by a DAA described her confusion regarding her job duties:

Well, it's funny. I didn't know (agency) did adoptions because the party line is kind of we don't do adoptions. We're not like the Ministry. So when…I got a few new kids on my caseload and there's these two and they were going for adoption and I was, like, I didn't even know we did adoptions here. Like, do we do adoptions? (laughter). And they're, like, "Well it's kind of a case by case basis"…Um, and I've talked to other workers and they didn't know that we do adoptions either and they've been here, some of them twice as long as I have, so I think, I think it's just, um, one of those things that nobody talks about (laughter)…and it's kind of a, like it's such a political issue within Aboriginal communities…and there's a few of us that are actually doing adoptions…it would be easier if we all talked about it (laughter). It's hard to work and be like, "Can I say the word?" (Caucasian DAA SW)

Another social worker employed by a DAA similarly noted:

The permanency work for…Aboriginal children in care, is just a phenomenal amount of ethical dilemmas and questions and curiosities and often no practice examples or paths. Um, it's really, really challenging, and it feels…really heavy with a great deal of responsibility, and especially in working with social workers who are at different points in a continuum, of, um, buying in if you will or of understanding (agency's) approach to that. It's a challenge because sometimes you often feel like I'm standing on a ledge by myself saying, "This is the way it should be and, wow, I hope I'm right". (Aboriginal DAA SW)

Organizations that support Indigenous knowledge. Another theme that arose revolved around the need for social workers to plan for Aboriginal children within systems that do not always support Indigenous knowledge but rather plan from an almost exclusively Western

worldview. One social worker spoke of her experience working on a cultural plan that required engagement by an elected leader within the community:

> There were pieces in there where they expected the chief counsellor…to maintain relationships and to provide cultural traditional foods of the territory for the kids until they age out…I read it and I'm going whoever wrote this cultural plan has no idea what it takes to gather food, the time, the equipment, the money , they have no idea what they're asking…this document obviously was being written by some far off office by someone who knew nothing about life on the reserve and food gathering from what, First Nations perspective and what it takes to go out there because food gathering is seasonal. Every month there's a different food that you gather and prepare, every month. So what they were asking was not going to happen and I knew the plan wasn't going to work. The chief wasn't going to sign it…And I thought all the rest of the people who weren't Indian would sign it and say, "Yay", all the Indian people who had to sign it were going, "Oh" (laughter). So there was a disconnect in the knowledge, the perspective, and the depth of expectations. (Aboriginal DAA SW)

Cultural connection and identity. In Chapter 1, I discussed my personal struggle around wanting to keep children in care connected to culture in a way that would ensure they grow up with a healthy sense of personal identity. Before speaking to my participants, I was unsure whether other social workers struggled with issues similar to mine; however, I found throughout my interviews that many of my participants voiced similar concerns.

Identity. Both the MCFD and DAA social workers in my sample expressed feeling conflicted over their need to help the children on their caseloads build/maintain a strong sense of

identity while at the same time acknowledging that it is incredibly difficult to build that sense of identity outside of community:

> They will never know what it really is to feel a belonging to a community and a people and a way of life. They will never know that. Because they weren't raised on the reserve, around their people, doing those traditional things, which, like on a daily basis, it's not some fancy dance song or whatever or big ceremony, it's getting up with your grandmother and helping your grandmother and listening when your grandmother tells you to do something. The respect isn't taught. It begins there. And if you're out with your aunties and uncles or your grandparents and you're walking down the road and there's, um, an animal hurt on the side of the road, they teach you to look after the animal so you're paying respect to all living things. That's the disconnect that children who are raised in foster homes will never know. You can bring them home for a visit twice a year but they will never get that daily experience so it's in their bones, it's the way they think, and it's the way they make their decisions based on that knowledge base. They will never have that. And I knew that when I was doing this adoption, but doing the adoption pieces really brought it home to me. (Aboriginal DAA SW)

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> The community connection is key. There's no doubt about it, however you can make it happen. When you interview, and we did extensive interviews with adults in the community who had been in care, they talked about that identity piece over and over and over. That when you don't belong, when you don't look like the rest of your foster family or adoptive family, and you don't belong on the reserve, you're in no man's land. And so we heard that loud and clear. (Caucasian DAA SW)

Similarly, several of my participants made the point that First Nations children who grow up on reserve and are then placed for adoption off reserve do not fit in with the larger, Western community:

When you take a child who's been raised on the reserve within their own family structure, and within their own community structure, and you put them off reserve, they're in a foreign country with foreigners, with a foreign way of being in the world, a foreign way of thinking, foreign values. That's how harsh it is. (Aboriginal DAA SW)

The difficulty of regaining that lost identity in adulthood was another factor that weighed on the social workers planning transracial adoptions:

I have a really hard time with the lack of cultural permanency for kids, like it's really hard, like if you're…adopted by a non-Aboriginal family…and then you're 19 or 20 and you want to find your roots and then you go to (your community) to find out who's who in the zoo. Maybe you already have contacts and this and that. Maybe you've maintained relationships. You're still never going to fit in. You've lost that. We've robbed them of that and they'll have feelings of isolation and they're still going to feel like, like they're kind of in an in-between place… I hate doing that to other adoptees. I feel saddened by that. (Caucasian MCFD SW)

Cultural plans versus lived experience. The largest issue raised around identity formation and Aboriginal transracial adoption was the sentiment that, although cultural plans are intended to ensure children stay connected to their cultures and communities, thereby maintaining a healthy identity, they are often ineffective. One of the biggest concerns expressed around cultural plans is that adoptive parents often do not carry through:

Doubting their sincerity. Yeah, when you sit down to review it when you're getting close to completing, because we're supposed to review them once during the adoption residency period and, um, and you realize that they haven't done anything and they, um, they blame it on the on the community, well nobody's been in touch with me, you know, they're not taking any responsibility for making those connections themselves and...another month and I'd be able to do the court docs for that family and, you know, like so it's a dilemma. Do I delay the process and tell them that they have to do this or do we just carry on, get it done, and hope they will eventually? (Caucasian MCFD SW)

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Sign on the line. Yeah, we're going to do this, we're going to do this, and then they just disappear. We don't hear from them. The Aboriginal agency does not hear from them. They do not get the emailed pictures and updates and they don't bring them back to come see the community or talk to birth mom again...Those have been devastating and really made it hard to have a good working relationship sometimes with (local DAA). So I'd say that, people not following through, that's really depressing and it makes it very difficult, you know. (Caucasian MCFD SW)

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Um, when I first became guardian for this young girl, now been adopted, I was told, oh, this home's...very culturally involved and I was like oh and I'm reading through the file. Where's the culture? (laughter)...and for that caregiver to take this, the kids in her home to a (New Year celebration) once a year, they said she's cultural. And I was, like, no. I was like where's the food? Where's the teachings? Where's the, you know, there was so much in my cultural eyes that were missing. And you know and for me to, it took a year

or two to flip it, to get her on board with the language, with the joining of the dance group, to feeding the food in the home. And even meeting an elder. And talking with an elder. Because they weren't, you know, they signed a paper saying they were going to be culturally involved and bring some of that into the home. They sign that yearly. But I wasn't seeing it. (Aboriginal DAA SW)

Although many of my participants expressed concerns regarding adoptive parents carrying through, some also pointed out that the Aboriginal communities that are part of the cultural planning are not always accommodating and at times do not have accessible cultural information. For example, one social worker noted that she had sensed a shift in how outsiders were received:

Some communities don't even want you to be on their land let alone talking about their kids or doing matches…I don't know, there's been a change in the atmosphere. I've been to different friendship centres and gone to different events in the past. A couple of years, the energy is really shifted. It's very, it's not as welcoming. It's more guarded. Um, I used to just feel great about saying, hey family A, go to this event and it'll be great for the kids, you'll be welcomed, it'll be wonderful and now I go with them and I feel the tension and the differences. And it's just there. I mean, it's not like people don't come up and smile and do the welcoming. It's just you're very, you feel very much different and alone. It's shifted. (Caucasian MCFD SW)

Another issue raised by my participants involved a concern regarding whether or not the measures written into a cultural plan are even able to keep a child genuinely connected to culture and community:

It's a key point to someone's identity is having that awareness about themselves and not, you know, having it just be a poster on the wall or a dream catcher, not tokenized, but something that was actually valued in their household and more than just a once a year culture camp, right? (Aboriginal DAA SW)

One First Nations social worker practicing in her community pointed out that, as a result of colonization, they have lost a lot of their culture, making it that much more difficult to pass that culture along to children in care:

And I admit, we only have tokens, even in the villages. We only have tokens. We have…snippens of our dance practice, we barely have our language and I don't even see us using our medicines, even our berries, as much. So we have tokens. All over. Even in our community, our regions. (Aboriginal DAA SW)

Interestingly, some of the social workers that I interviewed noted that, despite the fact that cultural plans were created to address previous colonizing practices, they believe that they actually perpetuate colonization. This perspective arose in two very different ways. To begin with, one First Nations participant stated her belief that the bureaucratic nature of cultural plans is consistent with half-hearted government measures of the past, noting their similarity with attempts by the federal government to bring about reconciliation around residential schools:

We put in a stop gap, it reminds me a lot of the residential school settlements and if you check these boxes, you'll get, and that's wonderful to offer compensation but at the same time it's people checking boxes so how meaningful is this for either party? (Aboriginal DAA SW)

Two of the MCFD social workers I interviewed provided a much different perspective, expressing their beliefs that, by delaying permanent placements for Aboriginal children by prioritizing the rules around cultural planning, we are actually perpetuating their colonization:

It's a system which is saying that this is the way that it has to be in order to support a child's heritage…you know, the things that are important for a child like being a part of a family are not as important as getting this, um, well, you know, in looking at the history and the 60s Scoop and, you know, how many children were lost, you know, I can totally understand why our new Adoption Act says that we have to do… cultural plans and exceptions. Like I can totally understand the policy but, um, I don't, I don't think that we are doing…good guardianship by saying that we absolutely have to do those for these children. I don't think it's for their best interest to have to do these pieces in the meticulous way that we are doing them. Like, I think that there's better ways to do them, so the link to colonization for me is that it, by doing these things we're oppressing these children further rather than supporting them. Like I think the intent is good but the um, what actually happens, like the actual practice, is oppressing the children further. (Caucasian MCFD SW)

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What I feel is that society, you know, colonized the people…and what I kind of see now sometimes is almost it seems that the Aboriginal community, some of them, not all of them, but there's some of them that are trying to get political, it seems to be more political and it seems that they're actually, um…I guess in their own way colonizing their own children, right? And I feel very hurt, for the kids for that because they're now the pawns in um in this struggle, right? And, you know, where the Aboriginal people

themselves that are saying, no, we're not going to have an adoption plan and yes this child can go to 10, 12 foster homes as long as they're not adopted. That's all we care about. And when you, um, you know these children personally and, you know, there's a lot of Aboriginal families that would give their eye teeth to adopt some of these children, you know, it's hard to know that that child is only seen by their community as a political pawn. ..so I think that's where my devastation is…yes, you know, colonization, the White settlers, we did all that but now it seems that they're actually doing it to themselves. So that's the hard part I think, when I see that. (Caucasian MCFD SW)

Self-identification. Many of the social workers I interviewed also brought up the larger concept of Aboriginal self-identification as it related to the development of cultural plans. As stated previously, social workers are mandated by the MCFD adoption regulations to seek an Aboriginal adoptive home for an Aboriginal child before considering non-Aboriginal adoptive homes (including long-term non-Aboriginal foster parents). Although a cultural plan must be negotiated when Aboriginal adoptive parents are from a different community than a child, there is no need for approval from the Exceptions Committee, which expedites the entire placement process. In addition, some bands are more likely to engage in a cultural plan that involves placement with Aboriginal adoptive parents than one involving non-Aboriginal adoptive parents. Although these rules are intended to keep Aboriginal children in Aboriginal homes, they have resulted in an increase in prospective adoptive families who begin to self-identify as being Aboriginal once they start the adoption process and realize that it is to their advantage. The concern voiced by my participants is that the government policy that favours Aboriginal adoptive homes for Aboriginal children has actually resulted in those children growing up with no more (or even less) of a connection to culture than if they had been raised by adoptive parents who are

technically non-Aboriginal. This situation leaves social workers in an ethical dilemma where they are left feeling disingenuous because they are following policy in practice, though perhaps not in principle:

> We've had, coming out of the woodwork…I've seen as people who've found, you know, going through the homestudy process, oh by the way, you know, my great, great grandfather was Ojibway and blah blah blah. You can't prove anything and so you've got people all of a sudden who have Aboriginal ancestry which are, appear to be good enough for, you know…that's what an agency is looking for, but then they never follow through on the other end, right? Because they, that's not part of what they, that's not part of who they are, right? So I think sometimes the ancestry is, I think the hard part is that it can be a tool that's not necessarily the best tool to judge people by and so I would much rather personally, you know, see a child go into a non-Aboriginal home that is embracing (cultural planning)…they go above and beyond what a lot of times Aboriginal adoptive families do… Somebody can pull a piece of Ojibway out of the hat (laughter) or something…it's a hard, and you can't prove or not prove, right? (Caucasian MCFD SW)

Personal roles. Although examples of cognitive dissonance were interwoven throughout all of the interviews, it was most poignantly expressed when my participants discussed their personal roles in transracial adoption. This finding may be related to the fact that, although cognitive dissonance is difficult to experience under any circumstance, it is most painful when an important part of our self-concept is challenged, specifically when we do something that is inconsistent with our view of ourselves (Tavis & Aronson, 2007).

Being a social worker in a flawed system. Many of the social workers I interviewed expressed the dissonance that arises from valuing permanency and the work they do around

permanency planning while at the same time believing that the systems within which these plans

are facilitated are inherently flawed.

> Even just in general the system…I don't have a belief that this is the best system for
>
> kids…so it's, like, you're working in a system that you don't entirely believe in. But I
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> also believe that, um, I can make a difference. I can't change everything at this point but
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> I'd rather it be me than…um…even some of the people I went to school with where I
>
> thought oh my God if you work with one of my relatives I'll be heartbroken for that
>
> child. (Aboriginal DAA SW)

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> You're not wanting to come across as an MCFD employee…'cause that's the whole
>
> reason I got into Aboriginal social work, to incorporate our First Nations perspective into
>
> our work and to be respectful of our families and empower them, you know. So…I don't
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> want to be seen as somebody who's stifling our own people and our own children…But
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> our system is set up as such, so it is, it's a constant struggle. (Aboriginal DAA SW)

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> I said I wasn't going to work in child welfare. Absolutely not because it didn't align with
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> what I believed. Where am I? (laughter) Child welfare. This is the absolute place I did
>
> not want to be…So things that I fought, I might not like, I actually really like.
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> (Aboriginal DAA SW)

Personal role in colonization. The social workers I interviewed also worried about the

personal role they were playing in perpetuating the colonization of Aboriginal people. For the

non-Aboriginal social workers, the worry was perpetuating colonization on people who had

already endured harm. One participant discussed the altered viewpoint she had after cultural

training, where she learned about colonization and the importance of identity/culture for

Aboriginal children and communities:

> What I went back with was this cracked open realization of the importance of culture that
> I had not placed any value on and that was my moment of realizing about colonization
> and culture and the dismissiveness of white privilege on Aboriginal culture and the next
> layer of that is the dismissiveness of culture in general because white privilege is white
> privilege. We don't think about it. We don't think about why we have capacity because
> we have it. We are just in it, doing it. And expecting other people to do it and pointing
> fingers in our arrogant little pedestals. (Caucasian MCFD SW)

For the Aboriginal social workers in my sample, this worry took on a very personal

flavor:

> And it's not working. How can it be working? If 80% of the kids are Aboriginal in care,
> is it working? …and when I first heard that the foster homes were the new wave of
> residential schools, I was going, hmmm? Residential schools were pretty bad. And then
> you hear about the kids dying and you see the numbers...So when I think about the
> adoptions, interracial adoptions, and the well-being of children and what's in their best
> interest and maintaining identity and what it takes to maintain an Aboriginal identity…It
> created, for me, a sense of being disloyal to my own people. (Aboriginal DAA SW)

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> I think one of the things that actually shocked me when I first started child protection in
> the beginning of my career…was I was asked by my team leader to go out to one of the
> rural communities up north and, um, basically I was told that there were no First Nations
> children on that reserve. That they had all been taken away…And I was just…I was

really taken aback because, you know, hearing that in your studies in theory, through books, and then actually seeing it in that day and age and knowing that there are no children left in that community is just, it's really heart-wrenching. And so it really hits home when you actually see that occurring…you kind of think, oh this happened a long time ago, 60s Scoop and all this stuff that we learn through our degree but to actually see something like that, it's, it's, it takes you back and it really makes you think about where kids are being placed, how well are we doing our work? (Aboriginal DAA SW)

* * *

I'd put together a cultural plan that was more realistic and I was supporting the adoption process, and I had really mixed feeling about it. I mean, I had mixed feelings about was I … was I adding to losing more of our people? Or was I protecting them, safety and well-being of our people? I was torn, really bad I was torn. (Aboriginal DAA SW)

* * *

It's such a heavy responsibility. Are you making the right decisions? How do you know we're making the right decisions? What does that look like? And I think for me, continuing a legacy of colonization is a huge fear. Um, and the alternative when we can't support an adoption plan and the child remains in the care system, that's also a struggle, because the care system is imperfect and we're preventing a child from having an identity and there's fears around both those things, right? (Aboriginal DAA SW)

* * *

Yeah. I still struggle with that one because the (First Nations) woman in me hurts for this, this youth and for her children because they're going to further assimilate. She is

going to become (White). She truly is. And I feel it. I know it. And there's nothing I can do. (Aboriginal DAA SW)

Being white. For the non-Aboriginal social workers in my sample, there was an added layer around doing work that they valued while at the same time struggling with the belief that Aboriginal people should be doing the planning for their own children:

I wish I wasn't completely white. …I don't like being on that side. I wish I wasn't the representative of all of that…I do wish I could say, no, I have Aboriginal heritage…You know what I'm saying?...But I can't help that…I feel weird, you know, like you go to (First Nations community)…I enjoy it, I think it's cool, but I kind of go, ugh, really? Here I am. Coming in with my power, my stuff…I wish it wasn't me. I wish there was someone else to do that work for them, from their own community. I do feel self-conscious. You know, I feel weird about it. That I shouldn't be the one doing this. That they have people that are better suited (laughter). I don't know. (Caucasian MCFD SW)

* * *

I wish I didn't have to do it, actually. I don't enjoy that aspect of it…I enjoy working with Aboriginal people, but it's a very difficult and uncomfortable position to be an adoption worker doing planning for Aboriginal children…and I try to do the best I can and I try not to over-step my bounds and I try to just be there at their disposal. I try to see myself as a servant to them and to meet their needs and what they feel is their planning but I'm not ever comfortable jamming my agenda down their throats…the confines of what we work in is…just sort of value-driven from European, mainstream, or whatever, and you can't cookie-cut that for the different Aboriginal communities. So I'm hugely impacted. I struggle with that all the time. (Caucasian MCFD SW)

The social workers who expressed discomfort around doing this work as a Caucasian social worker often helped alleviate some of that discomfort by allying with local Aboriginal communities; however, these partnerships produced another level of dissonance when they found that MCFD management then began to view them as outsiders:

Yeah, it would be easier if I was Aboriginal (laughter) because in a sense you're an outsider in so many different ways. You're an outsider because you don't have that heritage, so you come into situations with a disadvantage. You're an outsider in a sense with the Ministry because you're seen as befriending, in a sense, Aboriginal people, so in that way you're kind of placed outside of different realms. (Caucasian MCFD SW)

Other social workers, however, expressed being non-Aboriginal as a possible advantage:

It's because I'm white that this role needs to take place. Because I need to have the conversation that says where do your prejudices sit? In a safe way...And for them to be safe enough to be able to say to me, those stupid bands, they don't return my phonecalls. They're not going to say that if it's somebody that they feel that they are walking on eggshells with and they don't know where it starts and ends and we need to start unpacking our racism. We need to start unpacking what had got us stuck. Because that's the important piece. That has got the Ministry stuck. (Caucasian MCFD SW)

It was not until I had finished writing up my findings and begun to edit this document that I realized something interesting. The ways in which my participants describe experiencing cognitive dissonance closely mirror the issues in Aboriginal transracial adoption described in my literature review in Chapter 2: Attachment, identity, and best interests. For me, this link between the literature and my findings suggests that the experiences expressed by my participants are shared within the global community of people involved in transracial adoption.

How does that Cognitive Dissonance Impact Social Workers?

In Chapter 1, I described how research conducted by social psychologists into the impacts of the discomfort/tension produced by cognitive dissonance has focused on either physiological, scientifically-measured impacts or psychological, self-described impacts. Given the qualitative nature of this study and my decision to work within a Métissage framework, I took a somewhat more open-ended perspective than either of those, looking at the self-described impacts to my participants' physical, mental, spiritual, and emotional selves, as per classic medicine wheel teachings. Taking this perspective was significant to me for two primary reasons. From my worldview as an Indigenous researcher, it was important to me that my research acknowledge the interconnectedness of our physical, mental, spiritual, and emotional selves and recognize that these parts are not discrete: whatever impacts us in one area has the potential to impact us in other areas. Secondly, from both my perspective as an Indigenous researcher and my decision to employ qualitative methods, it was important to me to acknowledge the intrinsic ability of my participants to give voice to how they are impacted by the dissonance rather than relying solely on scientific measurements.

As stated previously, not a lot is known about how the negative arousal from cognitive dissonance impacts people and my decision to explore these questions in a qualitative way was somewhat new territory, making these questions the most difficult for me to ask. Part of me wanted to poke and prod like an investigative reporter until I got my answers; however, I tread carefully out of a sense of respect for each participant's right to maintain her personal safety by choosing what to share with me. Each of the participants in my sample directly discussed ways in which the work has impacted her and/or indirectly alluded to impacts while describing her work; however, one factor is important to note as you read the following section. Given the

variety of work that my participants had engaged in and the fact that their jobs often overlapped with each other as well as with the events of their personal lives, it was often difficult for them to exclusively attribute the impacts they experienced to cognitive dissonance arising from transracial adoptions. While the impacts discussed below were at times attributed solely to cognitive dissonance arising from Aboriginal transracial adoption, at times they also resulted from other work and life-related issues.

The themes and sub-themes arising from my interviews are summarized in the following table:

Themes	Sub-Themes
Physical	• *Weight gain* • *Loss of sleep* • *Headaches* • *Development of related medical issues* • *Use of (self)medication*
Mental	• *Worrying* • *Fantasizing about job change* • *Developing a negative outlook*
Emotional	• *Experiencing sadness* • *Crying* • *Disassociating* • *Hardening* • *Isolating/feeling isolated* • *Becoming more open and accepting*
Spiritual	• *Questioning yourself and your work* • *Becoming changed by the work* • *Connecting to culture*

Table 2: Themes and sub-themes arising from Question 2

Physical. For the purposes of my research, "physical" refers to anything relating to the physical body such as diet, physical health, and addiction (Twigg & Hengen, 2009). Eleven of my participants cited physical issues related to their work. For some, they experienced a general sense of "feeling sick"; however, many cited specific physical ailments they attributed to their positions.

Weight gain. Two of my participants said they felt the work had contributed to them being overweight, in part due to neglecting their health:

> Like I said, I would withdraw. You know, or I would eat out lunch every day (laughter). My workload was so heavy that I had no time for anything else and I'd come home and I'd be tired so…allowing myself to gain lots of weight (laughter). (Aboriginal DAA SW)

<div align="center">* * *</div>

> I was either in the office in front of a computer or sitting in meetings here locally or sitting and driving to get to meetings or in someone's home…and then, you know, eating in the car on the way and eating things that were quick to grab if you didn't take anything. It was not, it was not really healthy. The travel was becoming harder on me because I'd had (other medical issues) which led me to putting on more weight…and because I wasn't caring for myself as well as I should have been, I just, because there were things I wanted to do and accomplish and that was important to me, too, I think it definitely took a toll and I can really see it now. (Caucasian MCFD SW)

A social worker who was no longer practicing child welfare reflected on the improvements in her health, including significant weight loss, since leaving her position:

> I think I coped because I really liked the clients. I liked the families, the kids, um, learning about communities…that was kind of an adventure and…I enjoyed that part, I

think, but it took a toll on me. It took a toll on me health wise. I realize that in the year

I've been off...I've probably lost 60 pounds. (Caucasian MCFD SW)

Loss of sleep. Three of my participants said that they felt that the stress of their work had

resulted in sleeplessness:

I think about them, I dream about them, I wake up in the middle of the night worrying

about them. I really care what happens to them...ideally they would go back to their

home community, they'd grow up within their nation, they would have their family

around them, but not if they're going to be hurt. So...sometimes I feel like culture over-

rides some people's decisions too much...Like family and culture take a precedent over a

child's safety and it's like, no because you're still not teaching the child how to be

healthy within their culture. (Caucasian DAA SW)

* * *

Otherwise, if you look at...the whole system it's...not working. I'm part of it. But then

sometimes, too, well, I mean this goes both ways, too, if I think about. Okay, this child –

how would I feel if it was a relative?...I'm, you know, trying to do the best I can, but

some situations you can't sleep at night because, you know, they're not in the best

situation and you wish you could take them all home. (Aboriginal DAA SW)

Headaches. Two of my participants noted that they experienced headaches and one of

these described how her difficulty in coping with value-related conflicts resulted in her eventual

departure from MCFD to work at a DAA:

I think that in the beginning of my career it was like a slap in the face and I mean I really,

I had no idea what I got myself into and I was pretty shocked and overwhelmed and just

didn't have the ability to really do healthy self care. And so I think there were times

when I just went home and cried and cried and cried and took Tylenol because my head

was aching so badly and just totally overwhelmed and you know ended up having to go

to the doctor and saying I'm dealing with headaches on an ongoing basis and, you know,

it was just too much and so just started to really realize how much the work was affecting

me and that was…when I made my decision to make my exit. (Aboriginal DAA SW)

Development of related medical issues. Several of my participants noted medical issues

that, while they could not be attributed completely to the work, were exacerbated either by work-

related stress or by them neglecting their physical health due to their work. One participant

noted a thyroid issue, one noted heart issues, one noted dizzy spells that resulted in sick leave,

and one noted endometriosis that led to infertility:

I had endometriosis...then I actually had to have, like surgery to have (fibroids) removed

and as a result ended up being sterile because they had to do such invasive surgery...And,

um, yeah, so I really believe that it is…a result of stress in your body…but it was like I

had a work load and I didn't know what was really going on…and then finally at the

end… (I took a) year off and that's where I had time to actually have it looked into more

…and it was a really, really hard recovery. Yeah and I think…I mean I often think about

this, I think, did I stay there way too long or is that really what I should have done? And

you know, I don't even know. All I think is if I, I could have made better choices in that

place…I would have done things differently. (Caucasian MCFD SW)

Use of (self)medication. Two of the social workers in my sample alluded to self-

medicating as a way to cope. After discussing her own depression, one commented on the

general lack of health in her office:

Like, honestly, I don't know if you took a survey of this office how many of us, I'm sure there are some who are self-medicating with drugs and alcohol and there are others that are on anti-depressants, anti-anxiety medication, others who I'm sure are in counselling and stuff. I think the percentage of people that are actually quite healthy and coping in this office is probably small, you know? And we're in denial because we're like oh we can do the work, we're okay. It's like, uh, no, no we're not (laughter). You know? (Caucasian DAA SW)

Another participant discussed some of the self-medicating behaviours she had engaged in previously:

Yes I've gone home and I've had some drinks. I've definitely done that over the years. There have been times…but, you know, so I just spend some quiet time with my family, you know. So I try. I'm very conscious of unhealthy coping. So, because I come from a family with a lot of addiction, you know, so I, I'm always conscious of that. So I, not that I haven't dabbled in gambling and, you know, had a few glasses of wine to get me through the day, but I'm always conscious of it. (Aboriginal DAA SW)

Mental. For the purposes of my research, "mental" refers to anything relating to the mind, including general intellectual reasoning, education, and career development (Twigg & Hengen, 2009).

Worrying. Eleven of my participants cited ways in which their work impacted them mentally. The most often-cited impact was worrying, with 5 of my participants describing times when they would perseverate on work-related issues.

Oh, it's impacted me. I mean, I, I worry about stuff. I think about stuff. I can't not. I mostly do okay with it but I'll lose sleep. I'll sit up at two in the morning and go oh shit,

did we miss--? I worry about stuff. ...I just kind of, things go in my mind and I'm, and they don't always sit easy. (Caucasian MCFD SW)

* * *

There's a lot of intensity. And I'm not even a protection worker but I think a lot of people are surprised. (Another adoption social worker) came from protection and she said it's more draining for sure. A lot of people don't get that. I think you just got such, you're worrying about the forever, right? (laughter). It's not immediate safety, you know. (Caucasian MCFD SW)

Fantasizing about job change. My participants also described both fantasizing about doing another job or concretely thinking about changing social work positions, which often led to a job change. One social worker described how she thought about changing positions as a way to cope with the trauma of the work:

And you get a lot of people, their baggage, right? I mean, that has grown me as a worker and, you know, but that is also emotionally stressful, right? To have to bear witness to the pain is just, it's really traumatic and a lot of times I find this job so significantly traumatizing that I daydream about doing something else...I find myself day-dreaming a lot about doing something else because it is the most traumatizing work that I've ever done. I think it is more traumatizing than doing front-line protection...I totally think about changing jobs because I think it's so emotionally draining. (Caucasian MCFD SW)

Developing a negative outlook. Interestingly, several of my participants described the work contributing to them beginning to view the world around them negatively:

And I felt like sometimes you had all this negativity and you just had to get it out. So I felt like sometimes I was extremely negative...and I was in this negative place and so

sometimes I could feel like I was turning to, like, you know, just seeing things as really

negative, really difficult, all the time. (Caucasian MCFD SW)

* * *

At one time in my life I remember being so positive and um but I remember when it, kind

of like when you go to the dark side. I remember that. I think as a teen it was so easy to

go to the dark. It's so hard to come back. Very negative. Very, I was once a very

positive person. Very community-oriented. I'm getting back there. (Aboriginal DAA

SW)

* * *

At home I don't think I was everything I could be, raising kids, and, um, for me it comes

out in I sleep a lot more when I need to re-energize and at work I was just starting to be a

pissed off person (laughter). (Caucasian DAA SW)

Emotional. For the purposes of my research, "emotional" refers to the assortment of

human feelings (Twigg & Hengen, 2009).

Experiencing sadness. Almost all of my participants identified the negative emotional

impacts of their work. The most often-used word to describe these feelings was "sadness", in

addition to related words such as "hopelessness", "depression/anxiety", and being "heartbroken".

In total, 11 of my participants used these words to describe the emotional impacts of their work:

I think the impact is a feeling of this great sadness…that they'll end up with nothing, you

know? And to me, you know, culture and heritage, at the end of the day, you know,

they're not the ones that will give you Christmas presents under the tree when you're 25

and 20 and 21 and struggling and ten dollars for gas in your car, or? You know, there's

other pieces that are so important, too, it's not just about heritage and culture, it's about

having a family that you can count on, that'll be there. May not like what you do sometimes but you know they'll be there when the chips are down and that they'll support you in a way of, you know, helping you past 19. You know, who's going to baby sit the grandbabies, who's going to be there to say, well let's figure out how to get you back into college, you know? Let's figure that out together. So…the impact I think is, it just seems that there's not enough happening I guess. That I want, I want desperately, more, I don't know what that would be. (Caucasian MCFD SW)

* * *

Like, I find it's, um, you know, I just am involved in things and see things and hear things that probably would send most people over the edge…I don't want my kids to know that. I want them to go off and be free to do what they want and not have all these sad stories and worrying about all these people and stuff and I know that's a really selfish thing to say but I just find social work, you know, I love it. It's my passion. I can't imagine doing anything else. Like, it is who I am, but I'm not healthy. Like, I, you know, I'm prone to depression. I get really bad anxiety. I often have problems sleeping. Like, it really impacts my life. You know, we were joking about the bathroom, right? I don't take bathroom breaks. I don't take proper lunch breaks. I don't take break breaks. Especially now that I've got kids, I come here and I just go, go, go, go, go, try to do as much as I can for these little people and then go home to my own little people and I'm tired and drained and stressed and it's, like, really? Who am I helping? You know? And the victories are so small, you know. But it's, it's, I really believe good social workers, it's a calling. We can't do anything else. I can't, you know at the same time I'm like well what else would I do? I'd be totally lost, because this stuff is still going on. It's not

like it's not going on because I'm not in it. But I hope for my own kids that they're healthy and they don't have that kind of caregiving need in them, that they can be free and go out and, you know, choose their own life and have a healthy life and have adventures and, you know, just enjoy all the positives that are out there instead of being with the hard luck and the underdog and everything. (Caucasian DAA SW)

Crying. Given the above references to feelings of sadness, it is not surprising that many of my participants discussed crying in response to their work:

And I'll know too if I'm having headaches every day and I'm stressed out and crying about the work and just, you know, feeling…not good about myself, then that's a sign, too, for me that this isn't, it's not working. (Aboriginal DAA SW)

* * *

That piece…and the other adoptions work, that made me sick. That tired me out. I would go home and cry, I couldn't wait for the day to end. (Aboriginal DAA SW)

* * *

I'm always surprised because I think I'm doing great, I think I'm doing okay, I have all these great coping mechanisms that I'm not even aware of because I've built them up over the years. Block it out, dah dah dah. Sometimes I can't even cry in situations where I should be crying. Um, and sometimes I cry in situations where I shouldn't be crying, you know? (Caucasian MCFD SW)

Disassociating. Three of the social workers in my sample described disassociating in their work as a coping mechanism. Asked how her work has impacted her, one social worker replied:

I think just a general disassociation of what people are going through, a hardening to the grief and loss, I think. I think that's what it is. You're hardening to your grief and loss so you can see somebody who's grieving huge but if you were to just empathize with that grief then you wouldn't be able to pull it together to then move on. Like, you have to basically, and the grief and loss is, like we're drenched in it in adoptions, right? Because the child goes through grief and loss, the birth parents go through grief and loss, the adoptive parents go through grief and loss, the social workers, the guardianship social workers go through grief and loss, the foster parents who have to let go of the children have to go through grief and loss. And I hate grief and loss. I never wanted to do anything that had anything to do with grief and loss, yet I find myself completely saturated in it. So we disassociate. We purposely don't let it in so you put up emotional barriers so that you don't genuinely empathize too deeply in situations where you know you have to, right? (Caucasian MCFD SW)

Hardening. In addition to this disassociation, two of my participants described how they felt the work had hardened them. One described how she did not realize until leaving the work that it had impacted her in this way:

My guard is not up. My tough leather skin has been disappearing and so I would have to say during those years that I would just tune it out by letting it layer on me and allowing, there was a point when I got sick. And I do think that it's because I just kept putting a patch of that, I just kept patching myself, um, with this tougher skin and it's starting to go away…I'm very sensitive now. I have a, my filter, I feel it right away. Almost a body reaction to um really difficult situations. Like, almost, a big body response. So it's, um, I've realized how much over the years I just kept packing it away. (Caucasian DAA SW)

Isolating/feeling isolated. Four of the social workers in my sample described feelings of isolation around their work. Two factors were cited as contributing to these feelings: 1. Permanency planning is very specialized work and therefore can result in you feeling isolated from your peers who practice in other areas, and, 2. Creating close alliances with Aboriginal communities and families can result in isolation from management. One social worker described the close relationships she forged with the Aboriginal people in her area and how becoming a strong advocate resulted in her feeling alienated by those in authority:

> And then I would go back to MCFD…sometimes I would feel like I was this Aboriginal person (laughter) and people would come to me, and I remember (manager) she walked into my office one time and said, "You know what? What's your problem? You're not Aboriginal. So why are you trying to pretend to be?" And I was, like, I have no words. I was just so stunned. And she's like, "Why is your focus always on Aboriginal people?" and I like I said, "Well, those, that's what we're trying to do, right? Aren't we trying to adopt children back into their families?" And then she was, like, so upset with me. (Caucasian MCFD SW)

Some social workers described isolating themselves in the work as an unhealthy coping strategy. For example, one social worker said:

> Emotionally I would just withdraw, so I would withdraw from my colleagues, I would withdraw from outside people. And there was a level of trust that you have to have and so I became more introverted in those situations, um, I did my job but my focus was on the clients that I was serving…my biggest thing was withdrawing and that's probably not the healthiest thing to do but it was how I was able to cope with it. (Aboriginal DAA SW)

Another social worker described isolating as a healthy coping mechanism she used as she learned to manage working within her community:

> Culturally, we were very social. I'm isolated now. I had to because we're a small community, um, and seeing the families that I'm working with, especially when we're heightened, when it's a heated, I didn't want to feel uncomfortable and I didn't want to make them feel uncomfortable, so when I first came back I was going to absolutely everything, but I've clawed that back to the stuff I absolutely have to go to. Yeah. Because a lot of people, as soon as they see me they're like (makes a face)…so I recognize now I'm spending more time at home. I have a real good relationship with my cat (laughter). (Aboriginal DAA SW)

Becoming more open and accepting. Although most of the examples given to me by participants involved negative emotional impacts, one participant cited a positive way in which the work had impacted her, making her more open and accepting than she had been in the past:

> I think it's made me more open and just accepting of you know, instead of looking towards utopia and that sort of view that I probably had in the early days that everything is going to be great and you go for 100%, I've been able to be at peace with that I think. I see that the best isn't always reachable (laughter), attainable. You do what you can and that will be good enough. Because there are no perfect families. Biological or otherwise. Everybody struggles. (Caucasian MCFD SW)

Spiritual. For the purposes of my research, "spiritual" refers to "moral values, respect, religious beliefs, and personal goals" (Twigg & Hengen, 2009, p. 16).

Questioning yourself and your work. The most common theme in this area revolved around social workers describing how the work had made them question themselves and the work they were engaged in:

I remember…my partner at the time, it would come to Saturday and him saying, "You know what? You have to stop doing that shit. You know, it's, it's not good for you. Like, why are you still doing that?" And, and for a while you do question yourself. Why am I doing this shit? I don't have to do it. (Aboriginal DAA SW)

* * *

I think it can impact you because you can be really hard on yourself and definitely makes you question are you in, are you in the right line of work, should I be doing this job? Like, there's definitely been times when I've gone, do I want to continue with this? Definitely more, I think, when I've been with MCFD there's been way more conflicts and I've said it's time for me to, to go. (Aboriginal DAA SW)

Becoming changed by the work. The social workers in my sample also described how the work had intrinsically changed them and how they had to learn how to live and even accept this change:

Like 90% of my day my values agree with what I'm doing but there's occasions where they don't and what else do you do with that but sit with that internally? (Aboriginal DAA SW)

* * *

It makes you grow up really quickly, doesn't it? Um, you sort of lose a naiveté that you may have. I remember, a good friend of mine dating a social worker for the first time and him saying to me…"It never occurred to me that children came into care". Isn't that

amazing that for the average white computer programmer, that this world doesn't -? And so I think when you are exposed to these kind of situations and what genuinely happens in children's lives and Aboriginal children's lives, I think you grow up quicker and I don't think you have that same naiveté that perhaps the rest of the population can settle in on. I think sometimes it's hard to laugh lightly. I think sometimes it's hard to, um, let things go as quickly um you know I'll go home and be really quiet…my partner would say to me, "Tough day, huh?" Yup. Um, and it's not something I want to talk about because it just feels like an expression of pointlessness, but there's a quiet realization that you're experiencing the world differently and you're seeing things and being part of things that the general population doesn't experience. (Aboriginal DAA SW)

Connecting to culture. Although the majority of my participants noted negative impacts from cognitive dissonance, I feel it is important to acknowledge that some of my participants noted positive impacts that had arisen from their experiences of cognitive dissonance. For example, one participant described how she had reconnected with her First Nations culture as a way of coping. I believe that this finding speaks to the resilience of the human spirit and the ability of people to find ways to grow and change when needed:

And then spiritually…I think it's been a growing piece for me. I delved more into exploring what my culture is and, um, you know, doing personal smudging for me and drumming and singing and learning different songs and so that was when I went to the DAA, that was encouraged and you know, the connections with all the way from my children to myself in learning about the community I was working with, so that was encouraged and fostered and so that kind of just kept me going on that path of self-identity and self-discovery. (Aboriginal DAA SW)

In What Ways do Social Workers Reconcile a Sense of Dissonance?

In this section, I am going to explore the ways in which my participants identified decreasing their dissonance. This section will be broken down into the previously-identified ways in which people generally reduce dissonance: 1. They change their behavior to bring it in line with the dissonant cognition, 2. They attempt to justify their behavior through changing one of the dissonant cognitions, or, 3. They attempt to justify their behavior through adding new cognitions (Aronson et al., 2007). As stated in Chapter 3, it is important to note that both of the latter methods of reducing dissonance involve adding a thought or cognition; however, #2 involves adding a cognition that directly involves one of the dissonant cognitions whereas #3 involves adding a completely new cognition that does not directly involve one of the dissonant cognitions. The themes and sub-themes for this question are summarized in the following table:

Themes	Sub-Themes
Changing the behaviour	• *Changing jobs* • *Engaging in acts of resistance*
Changing one of the dissonant cognitions	• *"Children can experience cultural connection in non-Aboriginal adoptive homes"* • *"Children can experience stability in foster care"*

Adding a new cognition	• *Seeing positive outcomes*
	 • *Focusing on others' roles*
	 • *Philosophizing about meaning, intent, and choice*
	   ○ *"I am doing my best"*
	   ○ *"I will be able to answer for my actions"*
	   ○ *"My plan is better than the alternative"*
	   ○ *"I can bring about change from within"*
	   ○ *"I am more capable than others"*

Table 3: Themes and Sub-themes arising from Question 3

Interestingly, when I analyzed the ways in which my participants reduce dissonance, the fewest examples arose around changing behaviour, a somewhat greater number arose around changing dissonant cognitions, but by far the greatest number of examples came up in the area of adding new cognitions. Earlier it was discussed that, out of the three possible ways that people reduce dissonance, changing behavior is the most difficult. It was not surprising, then, that examples of behavioural changes came up much less often amongst my participants than the other two routes to dissonance reduction. Other possible reasons for this finding include the fact that behavior in a child welfare agency is somewhat prescribed by legislation and therefore not entirely amendable as well as the reality that my sample did not capture social workers who might have changed their behaviours by ceasing to practice social work as a way of reconciling dissonance. Similarly, it makes sense that adding a new cognition would be a more straight-forward route to reducing dissonance for the social workers in my sample than changing a dissonant cognition. For example, when we look at the potential dissonance that could arise around competing needs (i.e. permanency, connection), it is difficult to find an argument against the importance of one of those in a child's health and well-being. Finally, there is the possibility that if a social worker in my sample held a belief that went against values widely-held by social workers (i.e. the importance of attachment), she might not feel comfortable expressing that to me in our interview.

Changing the behaviour. In the first part of this chapter, I discussed the ways in which my participants identified experiencing cognitive dissonance, separating those themes into 4 primary sections: competing needs, personal values versus organizational systems, culture connection and identity, and personal roles. Although there was variety in how my participants described experiencing cognitive dissonance, the ways in which they changed their behaviours to

reduce that dissonance were quite consistent: they changed jobs to ensure they were working for an organization that supported their values around permanency planning and/or they engaged in acts of resistance to ensure that they were doing the work in a way that fit their values.

Changing jobs. As stated previously, I interviewed 12 social workers who had been employed by a Delegated Aboriginal Agency. Five of those social workers had begun their careers working for MCFD and then chose to move to a Delegated Aboriginal Agency because they felt that the values of the agency allowed them to practice social work, including permanency planning, in a way that more closely aligned with their values than what they had experienced at MCFD. Two of those 5 ultimately chose to leave child welfare completely. Eight of the 12 social workers had only ever worked for DAAs and, although that is not an example of behavioural change, it is interesting to note that they cited value-related reasons for choosing to practice child welfare exclusively within a DAA rather than working for MCFD. One participant who worked on an MCFD permanency planning team for a short time explained her reason for leaving to work for a DAA:

> I think in my journey of social work, I at times struggled (with)…finding where I fit and…I definitely found the core values of the agencies fit better for me, um, with my personal values. As well as I found there was more flexibility to be more creative in planning. (Aboriginal DAA SW)

> * * *

> I remember doing my (MCFD)…evaluation, right? I said I need to go work in an agency…where I can learn to work with First Nations people the way that I want to. Because I was not getting it there, was not getting it, was not getting anything around First Nations people, I knew the practice wasn't in line with my own practice or my

world vision so I was, like, I've gotta, I even said that – I'm going to go learn it somewhere else because I'm not able to get it from here (laughter). (Aboriginal DAA SW)

One of the most experienced social workers in my sample had left child welfare completely in part because of the value conflicts she experienced around her desire to build genuine relationships with Aboriginal communities. She describes how she requested a list from MCFD management of the children from a local community so she could have a meaningful conversation with that community's leadership about planning for its children:

> And, um, I got the list and then I was told, suddenly, I couldn't share it with them. And I thought, you want me to continue meeting with these people, without—? Basically I was being told that I can't share information on (children from local First Nation communities) with the communities… They just keep changing the names of the same old things. I've always worked together with local people. You know, I try to learn myself and educate people about the system and, you know, ways we can work around it or be creative about it and it just seemed so fundamental to me that I just thought, you know what? I'm going to talk to people about (leaving MCFD)…and pretty much two weeks later I was gone. (Caucasian MCFD SW)

Engaging in acts of resistance. Many of the social workers I interviewed described strategies they had found to maneuver the systems around them so that they did not have to plan for children in ways that resulted in value/behaviour conflicts. For example, several MCFD social workers described their personal practice of requiring non-Aboriginal applicants who had applied to adopt Aboriginal children to go through steps above and beyond what was required by legislation/policy. This strategy was employed as a way of educating applicants around

Aboriginal issues as well as weeding out applicants who were unlikely to carry through with cultural planning. One MCFD social worker described how she had allied herself with the local Aboriginal communities and had formed an agreement with her team leader that she would be allowed to prioritize the homestudies requested by the communities as long as a certain percentage of her homestudies were completed with other applicants. When she did work with Caucasian applicants requesting Aboriginal children, she founds ways to ensure that they were genuinely on board with cultural planning:

> I actually had people say that I was really, really hard on them and they didn't like that… so I had this little bit of homework that I would ask them to do before and that was just my own, um, thing and sometimes, like, I had one couple they just weeded themselves out. They said, "We don't have any interest in this", "We don't want to live like this". You know, it was…things like, you know, do you have anyone that you know that's Aboriginal that you have coffee with? Like, anybody in your sphere that is not of your culture? You know, is there any events that you go to that are not, you know, your cultural events? So I had this little bit of a homework thing…Um, and for one couple because they really wanted to adopt an Aboriginal child, I asked them to make connections and then to report back to me…and then she was like, "I'm not doing this". "I'm not comfortable with this, I'm not doing it. We're taking our name off the list".
> (Caucasian MCFD SW)

Another social worker described how she used a similar strategy to weed out applicants who were primarily applying to adopt an Aboriginal child in order to increase their chances of getting a placement:

Um, I take it really seriously. I think I'm, like, I'm a bull dog with it. Like, I go, you're coming to me to say you're open to adopting Aboriginal kids...But I've had families get part way into (the course for Caucasian families who apply to adopt Aboriginal children) and then call me up...Very upset about some of the stuff. And I go, well, you know what? You need to do this and keep doing it or you really shouldn't be doing (adopting an Aboriginal child)...I know I'm getting less and less adoptions like this because I'm getting way harder at scrutinizing people and I'm actually, like take this passionately and seriously or don't do it. Don't do it to get a kid. I'm sorry you don't have kids. And I know you want to help the children and all that. But I'm really pretty pushy and I kind of go don't do this unless you're passionate about it. You must have a real enthusiasm and...sincere interest and desire to help a kid stay connected to their culture. Don't do it because you know it'll raise your chances...don't do this, whatever you do, unless you really do think it's awesome...So I'm a lot pushier about that and I take it really, really seriously. So, again, it's reflecting on my (laughter) having a lot less placements, too, but I talk people out of it lots of times. (Caucasian MCFD SW)

In a similar vein, several social workers described how they would require foster parents who had applied to adopt a child in their home to demonstrate that they would carry through with cultural planning before the adoption paperwork would be initiated. One social worker described how her agency had developed this policy in response to experiences in the past where adoptive families had not carried through with cultural plans:

All new prospective caregivers that are coming aboard, go through more scrutiny...Now we're not doing signing off the cultural plans or anything until they've demonstrated it...And we're not doing this just to make everybody's lives hell. I'm very clear. I have

(adoptive parent) right now who says when is the adoption going to happen? Sorry but you haven't been attending anything, right? And she's pissed. She's mad. But I've talked to the aunty and I've said I'm telling you this is what needs to happen and why…she wants me to push forward with something and I'm like not comfortable doing that. And do I think she's going to be great? Yes. But we have this, this that needs to be fixed, worked on if we're going to. (Aboriginal DAA SW)

Interestingly, of the eight DAAs represented in my sample, five had a current practice of making their transracial adoption plans almost exclusively with foster parents who had the time to form relationships with the community and to prove their ability to follow through before the child's foster placement would be made an adoption placement. Only two were actively placing their children for adoption with Caucasian "stranger" applicants. One social worker described the experience of her community having children in care when the foster or adoptive parents did not carry through with the cultural planning:

We don't even know who these children are because they don't come to our feasts. They haven't come to our gatherings. They haven't come to anything and that's why we don't know them. (Aboriginal DAA SW)

Another discussed how her agency had made the decision not to support any adoption planning other than with biological family/community members and described the incident that led to this policy:

I was only involved in one adoption while I was working there. And it was about baby (name) and no one seems to know where baby (name) is anymore. The community sat down with the family in good faith and the MCFD adoption worker and we all signed off on the cultural plan where she would come back to the community once a year and then

would receive so many, um, the family would receive so many letters or updates on how she was doing, pictures, etcetera. And it never happened. And after that the community was devastated that they entered into that, again, once again losing children, and that was the end. There was no more discussion about adoption. Um, permanency occurred in other ways. (Caucasian DAA SW)

Another way that the DAA social workers had come to decrease transracial adoption placements was to avoid bringing children into care, primarily by supporting family and family placements. One social worker described a time when being creative in her work had allowed her to place with family rather than pursue an adoption placement:

Like one…(was a permanent ward) his mom was in care with us, too, she can't do it and I was like what about the dad and they're like the dad has this, this, and this in his history and I'm like but has anybody really looked at him? And they're like well if you want to go do the work, right, go ahead. So they're kind of giving me an out. The easy thing is just to…move it off your caseload. But I'm like but that's not the best thing for him. This little guy, he's like a year old, and so we went and did the work and had to get extensions and it was a huge pain in the butt but in the end he went home, right? To a family member, to his dad. So I find that you know sometimes I, people will tell me something and I'll be okay, okay, okay and then I kind of either slow it down (laughter) or try and find out a different way out or something because it's too, it's just too stressful for me just to, to toe the line and just do it. I'm not one of those workers that just does it. Like, I have to, you know, almost like a lawyer. (Caucasian DAA SW)

Social workers from four of the DAAs represented in my sample indicated that their agency's primary way of decreasing transracial adoption plans was to support family and family placements so children did not have to come into care.

Um, I can't say that we were always successful. Um, or that we always had enough Aboriginal homes or family homes but more and more in the last seven years or so, with a real focus on inclusiveness and family meetings and drawing community into decision-making, things became, I would say that the success rate started to be better and better. Um, what we concentrated on was not bringing any kids into care at all and we were successful. We had reduced our caseloads by 50 % in three years. And by really focusing on safety networks and community involvement and that, that theme that a village raises a child really became our living and breathing and this child's business is no longer private business to those parents until things change. This is now community-wide that these children are watched and cared for and everyone's involved and that, that made so much difference. (Caucasian DAA SW)

Perhaps because of the job security that comes from the years of experience of most of my participants, several overtly indicated that they would simply refuse to make a placement that went against their judgment and not one of them indicated that they had ever felt forced to make a placement against her judgment:

Um, I've been lucky because a lot of the times I can be quite stubborn and if things are going in a direction that I don't agree with, I just very diplomatically don't go in that direction. (Caucasian DAA SW)

* * *

I think that for the most part, if there was something I didn't, if it was, if it was bothering

me in terms of my beliefs, I would put that forward and say I don't think I can do this.

Then you're going to have to get someone else to do it. (Caucasian MCFD SW)

* * *

And somebody said to me well, no, you do what you're told because this is coming from

higher down to make this adoption happen. And I'm going I'm not doing that...if it turns

out that is an option, I'm not doing it. I'm so against it and my team leader would

support me on that. We're not going to, but even though it's kind of like...high up.

(Caucasian MCFD SW)

Changing one of the dissonant cognitions. As stated previously, in this section I was

looking for instances where my participants added a new cognition that directly involved

changing the dissonant cognition. There were two predominant areas where the social workers

in my sample demonstrated changing dissonant cognitions in this way: the need for children to

stay connected to community, culture, and birth family and the need for children to have

permanency. When it comes to juggling out needs such as permanency and connection,

dissonance arises as a somewhat complicated cognitive equation: on one side a social worker

holds the belief that she wants a child to grow up in a permanent, stable, adoptive home (with a

resulting impairment in community/family/cultural connections) and on the other side she holds

the belief that she wants a child to grow up in community, with a healthy sense of identity (with

a resulting impairment in stability). There are several ways, however, that the social workers in

my sample altered this equation to decrease the dissonance.

By far, the most oft-cited cognition that the social workers used was that genuine cultural

connections can be nurtured in adoptive homes that understand and embrace cultural planning.

I think the positive experiences that I've had with…First Nations children being adopted into non-Aboriginal homes, I think they've worked well because the family has, really, their values have aligned with maybe the community value around family being important and tradition being important and attending events being important and I think a couple of specific ones I'm thinking of, I think we had positive outcomes because the adoptive parents, although they were not from the same cultural background, they really took to heart that they had a responsibility to keep that child connected and also didn't, sort of, take ownership, "oh, it's my child". These children still belong to their community, too, and they really, um, took that to heart and really the inclusiveness was really there. Like, they had mom and dad at their home. When mom and dad weren't doing well, they kind of paid them to do odd work around the house…they would have family dinners and include family members, they took the kids to different events…so, um, and I think those are the adoptions I felt more comfortable with because they were already walking the walk, talking the talk…so I felt confident that it would continue to be that way and it wasn't lip service. (Aboriginal DAA SW)

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That comes down to the central question about adoption. Adoption, it is second best. It would be best if you had healthy parents…to raise you. And that goes for any culture, any kids…but when you have people that are the most prejudiced against in your society, they're, you know, how much better, it's so much better for that Nisga'a to have strong roots in a Nisga'a community, to go out to the world with. He's equipped compared to the kid who would be raised here by a Métis home, right? And then some, I mean having said that there's people that do have, you know, they do have strong cultural roots and

traditions that identify as, and it's not for me to say, well, you know, I'm not the one who judges that but, it's a dilemma. I think about it sometimes. One of my completely Caucasian homes absolutely they're just head over heels about all the Aboriginal stuff. They just bend over backwards with their kids on all that stuff. They do a really good job. And I think, they're actually moving to (the children's community)…They just think it'll be better for their First Nations kids there, more cultural stuff, more, just more involvement, so, I mean and so they're doing a great job. (Caucasian MCFD SW)

Interestingly, some social workers in my sample took this thinking one step further by reasoning that a culturally-attuned Caucasian adoptive parent can at times keep a child better connected to culture than an Aboriginal parent or adoptive parent, especially if that parent's ancestry is not part of her/his lived experience:

So I think sometimes the ancestry is, I think the hard part is that it can be a tool that's not necessarily the best tool to judge people by and so I would much rather personally, you know, see a child go into a non-Aboriginal home that…go to all the band events and they put their children in any cultural events, into jigging, you know, all sorts of different things that they partake in because what the mom told me is that I don't have this, I don't know this, I can't teach this on my own so I have to make sure that I'm always giving my children this type of culture. So it's very empowering because they get almost more than maybe kids that are actually adopted into Aboriginal homes, like Aboriginal children into Aboriginal homes, so I definitely see, I think a lot of times, non-Aboriginal parents, um, are more entitled to do that because they want what's best for their kids and they want to embrace that. So they go above and beyond what a lot of times Aboriginal adoptive families do. (Caucasian MCFD SW)

As one Aboriginal social worker explained, she felt confident that a non-Aboriginal person could raise an Aboriginal child with a genuine sense of identity in part because her culture had been taught to her by her own Caucasian mother:

Because my mom's non-Aboriginal but you'd think that she was...she's more Aboriginal than some of my Aboriginal aunties. So it's like do you really need to be Aboriginal to understand what's going on or how to give a child what they need? No. No. And I believe that whole-heartedly because my mom is non-Aboriginal but was able to give the kids -- identity and culture were hugely important to us. Family. Like, going to pow-wows and going to wakes when you know you're kicking and screaming at times when you're young and even when I didn't want to go I went anyways because I was supposed to go, right? (Aboriginal DAA SW)

On the other side of the equation, another way that the social workers in my sample decreased their dissonance was by adding the cognition that staying in foster care does not damage children irreparably. One MCFD guardianship social worker who had never facilitated an adoption on her caseload explained how even though she felt adoption was beneficial for children, she also felt that staying in foster care was an acceptable choice:

Yeah I think all of the kids on my caseload anyway, the homes that they're in are pretty stable. Like, I don't think that the foster parents are going anywhere. But they still need support but it's not, like the crisis isn't so bad that they're really in jeopardy of placements breaking down. (Caucasian MCFD SW)

Five of the DAA social workers that I interviewed voiced the same belief: that as long as there is cultural planning in place, foster care is an acceptable alternative for children because it can

allow for an acceptable amount of stability while still providing for community, birth family, and cultural connections:

> And of course you're not going to want the kids to grow up in foster care if they're in a crappy home but it's, like, as I've been able to kind of, you know, be more involved in where the kids go, I feel better about it because some of them, you know, have moved to, not necessarily family because maybe family's unhealthy but I have one little guy and he's living with…a First Nations woman and she knows his whole family and she knows how to keep him in touch with his culture and everything and he's doing great there. So I wouldn't look at adoption for him, you know. He's going to grow up in care, but he's going to grow up with her and we all have a good relationship, we all, you know, he knows he's looked after by all of us and he still has contact with family and stuff, so it's a good situation. And then I have other kids who, you know, um, maybe should be adopted. They're kind of little, little lone wolves out there and there's no family and there's no community member and there's no nothing so it would be nice for them to have that permanency and belonging and somebody to look after them post-19. (Caucasian DAA SW)

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> 'Cause I know that, you know, based on my understanding, sometimes, you know, they could look to foster homes in the area or people who are willing to take these children but at the same time, are they going to, is it like a permanent home, like a forever home? Even for after the kid ages out and that. I don't know. I guess in any home you have to question that, right? (Aboriginal DAA SW)

When coding this section, I reflected on the previously-mentioned Free-choice Paradigm, which acknowledges that two alternatives are seldom either entirely positive or entirely negative and focuses on the dissonance that arises when people choose between two such options (Harmon-Jones, 2002). My readers might recall one of the studies conducted around this paradigm, which had women rate household appliances in a survey. After making the choice, the women decreased their opinion of the unchosen appliance and increased their opinion of the chosen appliance. One interesting aspect of this paradigm is that, the less choice we have in a decision, the less dissonance that decision produces. I would argue that, in spite of the fact that legislation guides permanency planning, social workers are faced with quite a bit of choice in the work that they do, either due to overt autonomy or due to the flexibility that lies in the nuances of the work. My interviews suggested that, consistent with this paradigm, my participants may have altered their beliefs around their options in order to decrease their dissonance around their choices.

Adding a new cognition. As stated previously, for this section I was looking for situations where social workers added an entirely new cognition to their equation. The social workers in my sample most often demonstrated decreasing their dissonance by adding a new cognition. I categorized those cognitions into 3 broad themes: 1. Seeing positive outcomes, 2. Focusing on other's roles, 3. Philosophizing around meaning, intent, and choice.

Seeing positive outcomes. One of the ways in which my participants decreased their dissonance was by focusing on the positive outcomes they saw in the children that they placed for adoption transracially, including increased connections with birth family (including siblings), community, and culture; improved developmental levels; increased happiness; and a sense that

they were grateful in adulthood that this choice had been made for them. Seventeen of my participants discussed these positive outcomes:

> I think the biggest joy would be when kids have that. They have a sense of belonging, they feel like they can be somewhere, you start to see them excel in areas where maybe they weren't because they didn't have, if your basic needs aren't met, you're not going to…generally you probably won't do well in school, rec, you know there's so many things that come along with that and the trauma. (Aboriginal DAA SW)

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> But it's nice at least that they're in a good home and they feel like they belong and they kind of really blossom in those environments. They don't look like the same kids they were before. They gain weight and their skin looks healthier and they smile more and they just seem to be doing better. So that's been a really big, big accomplishment is just seeing them when they're in a happy home. (Caucasian DAA SW)

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> And I mean to do what we do for this long, you've got to find positives in the smallest, weirdest places (laughter) some days…like people have kind of changed my points of view. Um, the family support worker that I worked with…she was adopted. And she was a First Nations person and she's actually, ironically, living in her First Nations community and now has a relationship with her tummy mommy, right? Um, she went on to meet her you know, she probably had the most amazing adopted parents you could ever find, right? (Aboriginal DAA SW)

Focusing on others' roles. Another way that the social workers in my sample demonstrated their ability to decrease dissonance was by focusing on the roles that others,

including the child, the birth family, the community, and MCFD play in the process. Inherent in their reasoning was the knowledge that they are only one of many voices and decision-makers in the process and therefore cannot bear responsibility for all the decisions that are made. For example, many of the social workers in my sample pointed out that the transracial adoptions they took part in had ultimately honoured the wishes of the child, the band, and/or the birth family:

She was able to make a choice about this is what I want and being able to use her voice in doing that and I think, yeah, it was just a really nice way of, um, ending that really traumatic care experience and ending the experience of her not having a voice, through her band, through decisions that were beyond her. (Aboriginal DAA SW)

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These weren't my children, these were their children and what was it they needed from me to partner with them in what way so that they could do what they wanted and needed to do for their children? And I would say those words to them, these are not my children…These are your children. What would you like to happen? How would you like me to partner with you on this? I never did anything without going to the band office and saying who are you going to give me for my partner? These are not my children. (Caucasian MCFD SW)

* * *

Most of the work that I've done in terms of negotiating cultural plans has been done with the Aboriginal agencies I've been working with, so they're Aboriginal people working, planning for Aboriginal children and they're using me as an adoption worker to facilitate. (Caucasian MCFD SW)

* * *

An adoption plan, um, was made by the birth mom who didn't want her community involved so there's a lot of secrecy…That one would be an example of one that doesn't really sit that comfortable with me, just the secrecy around it. Which was necessary to protect the birth mom from her situation and whatever. I get that but that's just one that does go against my value system but I had to, you know, but I had to then just deal with it because it was --it needed to happen that way. (Caucasian MCFD SW)

Some of the social workers in my sample also reasoned that the other parties involved in the planning for the children, including the birth parents, community, and MCFD, did not always do their part, making it difficult to place with birth family or to engage in culturally-sensitive planning:

Yeah, and I mean basically at the end of the day we have to look at the best interests of the children, you know? And is a bio parent who has shown that they have difficulty taking care of their own day to day needs, their own housing needs, their own basic necessities, you know, how can they accommodate a sibling group of 4 with those challenges? It's almost impossible. So it tugs at the heart strings because you're trying to be as respectful as you can with the parent and just letting them know. You're trying to tell the child's point of view to the parent because you hear the children saying they want to stay where they're at, even if it's, you know, could be a non First Nations family. (Aboriginal DAA SW)

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Probably the last one I signed, we were really involved with the family and then they were at the point of having a second child and then she was pregnant with a third and capacity-wise um you didn't have to be a psychologist to realize their limited capacity to

parent these children. Um, and their children were going to be smarter than them and that they couldn't get past their own basic needs to support the children, right? So something like that makes it a little bit easier, morally, I guess, to live with, right? When you can see it. You know, um, when you know that those kids are going to have a better life and better outcome because even with all, and we're talking, like, years of support to this family and not applying anything you know, like there had been no change, really. (Aboriginal DAA SW)

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Because the family she originated from, they do very little to communicate, to stay connected. But if you see them in public, they bitch up a storm. "Well, we can't see her, we can't get a--" and we're just like, "Why don't you just phone?" We're ready and willing, more than willing to work, but they put on a real good show in public. (Aboriginal DAA SW)

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So I went to the band to try to get cultural information and whatever and I have a hard time going between the two cultural groups…And yet, um, I didn't find that band very open. They didn't have literature. They sent me down to a museum to watch a little video thing which I did. (Caucasian MCFD SW)

<div align="center">* * *</div>

It's tough. It's tough. My very first one was a young fellow. His mom is (Aboriginal community) and his dad is (another Aboriginal community) and it was quite interesting because when he first came into care both nations were notified but only (mom's community) remained in contact. There was no call back from (dad's community) to

MCFD at that time. And then, I guess with the First Nations they have high turnover rates, too. 'Cause I noticed that… they had a turnover, turnover, turnover…we had to get in touch with all of them and that was really a struggle, trying to get everybody to meet. And, and we finally did…We finally got everybody here. Um, we paid for (dad's community representatives) to come over and we paid for family members to come over and we met to come up with a cultural plan… And so everyone came over and this plan was good and okay, so I…started drafting it, drafting it, drafting it…And then, um…they had a change that, okay, no, no, we don't support any adoption out. And that panicked me. So I calmed down and then I had to explain, okay he's been in care for this long, parents aren't, even if the parents were in agreement, they were still vetoing it. They were, no we don't want any more. I said it's in his best interests. He's been in care. And it wasn't until I brought it to their attention, well your office was notified, and I gave them the date and I said and you were notified again here. It's notified no reply so they just took that as don't want any contact. And that was about 6 or 7 years prior to this conversation. So I was like it's unfair to this child. We can't just leave him because you've changed your policies. (Aboriginal DAA SW)

Within these cognitions was an inherent acknowledgement that one social worker cannot be responsible for all the planning that occurs around a child and that at times there are bigger dynamics at play that need to be addressed at a higher level than the front line. One social worker explained to me what she thinks would need to happen in order for some of the children on her caseload to be placed in permanent homes:

I think, like, today I would say that somebody that's not me, but like higher than me, would need to start to have a conversation with bands about being more open to children

being adopted, even if it's by the foster parents that they already support. (Caucasian
MCFD SW)

Philosophizing about meaning, intent, and choice. Finally, one of the predominant
ways that the social workers in my sample demonstrated dissonance reduction was by
philosophizing about how factors such as meaning, intent, and choice play a role in their work.

"I am doing my best". One of the main themes that arose in this area involved the
cognition that the work is difficult and all the parties involved are doing their best under the
circumstances:

> The hardest part is knowing that there is great kids out there that just need a home. That
> is really hard. I don't know how you live with it. You just do the best you can every day,
> right? And you know, hopefully come across something that you can make work. Those
> kids are always in your mind, you know what I mean? (Caucasian MCFD SW)

> * * *

> So it's, you know, I can go to a regret place and then I can go to the place of that's what I
> knew at the time. (Caucasian DAA SW)

> * * *

> I see that the best isn't always reachable (laughter), attainable. You do what you can and
> that will be good enough. (Caucasian MCFD SW)

> * * *

> Some of these communities, they're super busy, too, and it's a hell of a time just getting
> things signed off and...I think, you know, I don't know what's really happening. Um,
> out there, I think in general most people do the best they can. (Caucasian MCFD SW)

"I will be able to answer for my actions". One interesting theme that arose in this area involved social workers anticipating while doing the work that they would be able to one day answer for their actions:

And again it goes back to the, if that child showed up on your doorstep, one are you going to know who they are? Because who are you to sign this paper? Who gave you that authority kind of thing, right? So absolutely, I want to make sure that everything possible was done and this is unfortunately the last resort. And you know that I'll be able to have that conversation with that child when they either come back to the community or age out or just know that you did everything possible. You know? (Aboriginal DAA SW)

* * *

And being accountable to the kids so when I was doing the work, if a child comes back at me I can always say, you know, I did the best that I could and worked with the tools I had and, you know, having that accountability was really positive for me, that I knew when I was making the plans for the kids that I could, that I could be. I wasn't afraid that they would come back…my work was laid out there so I could make it, a justifiable plan – these are the reasons why and this is what we considered and so that for me was a good coping. (Aboriginal DAA SW)

"My plan is better than the alternative". The workers in my sample also reasoned at times that, although the choices they had come up with were not perfect, they were better than the other available choices:

Hmm, well I think it's better than aging out of care because I've seen, like lots of kids or a handful anyway in my time here age out of care and a lot of them have lived in foster homes that they've been really connected to and then it just kind of seems like leading up to their 19th birthday or shortly after they don't really end up having, even though you think that they're going to have, they had a good relationship with the foster parents and they're going to continue to have that relationship and it's kind of disappointing that a lot of the times it doesn't seem to work out that way. (Caucasian MCFD SW)

* * *

I think because really it's kind of the end of the line, it's sort of our last chance to try to help the child to get some sense of permanency if not, you know, a home that they have forever. I think that's where I've let go a little bit of that drive to feel like it's gotta be an Aboriginal family. It's like, okay, if I don't do this match, if I don't make this happen, then this child has maybe nothing, maybe grows up in foster care and doesn't get the opportunity to have permanency. So that was the shift for me. Was culture, if I had to, if it had to be a choice between culture and permanency, hoping that with permanency somewhere along the way we build in culture if it's not happening in the home. (Caucasian MCFD SW)

* * *

Yeah. But there's nothing you can really do about it because as an adoptee you're always displaced. Always. That's just the nature of adoption. And so there's pitfalls to adoption but then there's the benefits and they outweigh the pitfalls because what would the alternative be? (Caucasian MCFD SW)

"I can bring about change from within". Another way that the social workers in my sample demonstrated dissonance reduction was by theorizing that, although the system is flawed, they can bring about change, particularly from within systems:

I think that's one of the things that I've constantly questioned throughout my career (laughter). How do you feel good about being part of that little system that does perpetuate some of these unhealthy decisions that are still being made within our systems? But then at the flip side of the coin, how do you change it if you're not a part of that process? So, I think that's the thing that keeps me going as well is knowing that the way I see things and the way I do things is going to be very different than a non First Nations and so I have to believe that I'm being helpful in some way, shape, or form. (Aboriginal DAA SW)

* * *

We actually as an agency just attended permanency planning training…and I think we do have a very, kind of, unique way of looking at things. The Ministry is not, not accustomed to incorporating our hereditary system into the CFCSA (laughter) but I think we're getting to a point now where baby steps are being taken, where it's being acknowledged that the work that we are doing is important, and I think from what I'm hearing, there are inklings of upper management trying to incorporate that into the adoption process. You know?…it's a little glimmer of hope at the end. (Aboriginal DAA SW)

In keeping with that idea, several social workers reflected on ways in which they had successfully brought about change. For example, one described how her agency had learned to hold adoptive families more accountable around cultural planning than they had in the past:

And they still might not honour that but what we're trying to change here when we do family group conferences, to maybe work on these openness agreements and cultural plans is that they're held accountable by that family so it's not just us anymore. The family has been a part…of the planning. They've agreed to this. They come together as a group and agree to all of this. So now it's not just us they're accountable to. It's the family…we listen to them and we try to hear what they're trying to say and assure them or work with them around that but I really do bring it back to the family because I want them to be accountable, the adoptive parents to the family and the community. And I think that's going to work better and it already has. (Aboriginal DAA SW)

Other social workers described how they had tried, both inside and outside of their work hours, to work with individuals and local communities in a collaborative way and to help educate people about some of the issues at hand:

There were so many extra kids in care that were from the different bands so it started to make me think more about that and what my relationship would be with the different bands so I kind of took a personal interest outside of work and started working with different communities and develop a First Nations Day, which was on Canada Day (laughter). We brought different bands together and did things culturally, so I did my own learning I guess is what I'm saying and part of in my mind was always to try to get kids back to if not their parents, to their community, which is a Ministry goal anyways but it was a personal, you know, these kids need to be back with their bands. (Caucasian MCFD SW)

* * *

I feel very enlisted to be having conversations with non-Aboriginal people, especially 3rd

generation colonizers, because the conversation is different and it's because we sit in this

invisible state, this unintentional state, this, um, we're so unaware of our privilege and

what we have really done you know, I've given so much thought to this because this

really is my theme and has been for years now. (Caucasian MCFD SW)

One social worker described how she had worked for an extended period of time with a

community that did not support adoption, eventually forging a trusting relationship with them:

I feel really good about doing work where I can approve Aboriginal homes for Aboriginal

children. If I could do nothing else, I would be happy doing just that, because that really

sits comfortable for me. And so I was able to do that and it took a lot of, it was a really

painful process, because it took years but I think that I've bridged relationships now

because I was, like they see the proof is in the pudding, right? I mean I'm not just a head

that goes over there and says, "Mwah, mwah, mwah", talks about adoption and

permanency, but they can see that their own families can become permanent homes for

the children that are in care. (Caucasian MCFD SW)

"I am more capable than others". One of the most interesting themes to arise in this

section involved many of the social workers I interviewed taking pride in their personal practice

and reasoning that, although the work is difficult, they do the work more competently than

others. For DAA social workers, this sense of pride often extended to their agencies as well,

with a clear sense that, in the complicated world of Aboriginal transracial adoption, they are on

the "good" side. For MCFD social workers, this sense of pride was often expressed as them

finding ways to do the work the right way in spite of governmental/office policies. These beliefs

were not expressed arrogantly, but more as a quiet reckoning that, if you are going to be doing

this work, you can feel better about it if you are doing it to the best of your ability and are employed by an organization that allows you to work in a way that fits your values. At times this sense of doing the work more competently than others was expressed overtly and at other times it was woven through my participants' stories. It is important to note that this theme may have arisen so predominantly amongst my participants at least in part because people who feel proud of their work are more likely than others to come forward to be interviewed.

My value that drives me is this thing about the right thing has to get done. The right thing has to get done. Kids can't afford us not to do the right thing. And it was, like, I'm pretty thorough in my thinking and it's really critically important to me and um I do believe that there are universal, that there are ultimate right things (laughter) that, you know, that the universe dictates them. Like you don't smash into the iceberg, it'll kill you, right? And I think that sometimes, I think that, it breaks my heart to see kids going through our system and not getting the right things that they really need and I trust myself to figure it out and so my motivation to become a supervisor was because I would be able to have an ability to make sure a hundred different cases instead of 20 different cases got the right thing done (laughter). Is that crazy? (Caucasian MCFD SW)

* * *

But I think I'm someone who's invested and passionate about this work. I think I've put a lot of thought and consideration into the decisions I make. Um, and I think therefore these lives, these children's lives matter. They're not just files I want to get off my desk or through a system. Um, they're important to me. And I want to make decisions that truly in every level and in every way of looking at it honour and respect their stories and really act in their best interests. So for me I feel like if (agency) didn't exist or if our

program didn't operate from such a passionate place, that those children would be represented by the easiest decision or unthoughtful decisions or a lack of decision, which often is the case in the care system. And so I think the most rewarding part for me is ensuring that these children's lives matter and that the decisions that impact their lives matter and that are taken thoroughly into consideration. (Aboriginal DAA SW)

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You can tell something in the pit of your stomach when it's not right, it's not good. You see people striving to do this and because they're, they don't practice the same way you do or they don't do, they do things different. It's the same act but they practice a different way with that same act. Ours is a cultural approach and theirs is strictly by the Act, by the Practice Standards and stuff. Um, they're pretty much the same but ours has an Aboriginal perspective and theirs is just a regular guardianship practice standards. (Aboriginal DAA SW)

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So and I found actually helping to keep that going and connecting with community members has helped me build relationships and has helped probably um some community members have a better view of me in that I'm not just the person coming in with the social work hat, I'm willing to get in there and help set up food, help set up tables, help clean up, like that human aspect of things. (Aboriginal DAA SW)

"I accept that this work is difficult". Finally, the social workers in my sample also decreased their dissonance by simply accepting that the work that they chose to do is difficult:

It is what it is, right, and I never set out to have a um completely happy and well-adjusted life (laughter). That wasn't sort of my vision and working hard and working in difficult

situations wasn't something I was ever scared of and probably something I'm more passionate of so that's okay for me. Like, it's just, it's okay, and it's uncomfortable at times and it's hard at times, but it's also...it's okay. (Caucasian DAA SW)

* * *

It's not uncomplicated but I don't know that life for any of these kids is. I was talking to a good friend of mine the other day who was adopted and she's 61 now and on her birthday she goes through grief and loss stuff because she was a throw away baby and so does that ever go away for people who've been adopted? I don't know. You know, it's all, it's all hard. (Caucasian MCFD SW)

* * *

So you know what if work's hard one day? Then work's hard one day. Not that I'm saying that's unimportant and it's easy to brush off but I'm also not going to spend hours complaining about it until somebody asks me (laughter). Do you know what I mean? Like, we're so privileged to be healthy and be doing this work and I honestly believe every day that doing this work is a privilege and it's a gift and what an incredible gift to be given that I don't spend a lot of time reflecting on oh yeah this is hard and this kind of sucks. But more just really acknowledging that I am so lucky to be doing this work and to be in a place to do it and to be in a place to put my energy into it and that's incredible. And that people trust me to make these decisions, that I have an agency that I believe trusts and respects me? It's such a gift. So I spend more time on that side of the continuum than on the woe is me. I don't view the world that way. (Aboriginal DAA SW)

The responses involving this research question (i.e. in what ways do social workers reconcile a sense of dissonance?) were the most difficult of my three research questions to code. Although pointing out evidence of behavioural change is fairly straight-forward, describing the other two routes to dissonance reduction are not as simple, in part because they essentially involve us cognitively justifying our behaviour or thoughts. It is difficult to describe examples of justification without feeling that you are in some way being judgmental and, given the difficultly of the work and the way in which my participants honoured me with their stories, the last thing I wanted was to appear judgmental. My goal in this section was simply to report the examples I heard within their stories without passing judgment.

One of the most surprising findings involving this question involved behavioural change, specifically people choosing to change or leave jobs as a way to cope with their dissonance. In speaking to those social workers, especially the social workers currently employed at a DAA, I had the sense not only that they experience less dissonance in the workplace than their counterparts, but also that they have an overall higher sense of job satisfaction. This finding caused me to conclude that one of increasing job satisfaction may be to choose a job and/or organization that most closely aligns with your personal values. There is another important reason for choosing a job/organization that fits your values. One of the results of dissonance reduction is that, in time, it can actually cause us to change our values and beliefs in very powerful ways (Tavris & Aronson, 2007). The need to reduce dissonance in order to feel good about ourselves is so powerful that we will actually convince ourselves not only that what we are doing is right but also that, in spite of all evidence to the contrary, what others believe/do is wrong. Working at a job that causes you to justify your values can, in time, change your values at their very core.

In summary, I would conclude from my conversations with my participants that they do face many opportunities for cognitive dissonance, that it impacted them physically, mentally, spiritually, and emotionally, and that they reconcile it in a variety of creative ways. In the next chapter, I will discuss these findings in greater detail, providing suggestions for future research as well as recommendations for practice.

Chapter 5: Discussion of Findings

Having my participants share their experiences and wisdom with me was an amazing gift. After the interviewing, transcribing, and sifting for themes, I was left with one primary question: how could I honour that gift by providing a relevant conclusion, something that would summarize their experiences without ignoring any one voice, challenge my readers without appearing critical, and contribute to this work in an overall meaningful way? This chapter is my response to that task. In the first section, I will reflect on my research questions. Then, I will provide some ideas for areas of future research. Finally, I will close with recommendations regarding practice.

Reflections on Research Questions

Mid-way through my interviews, I suddenly had a sinking feeling that I had made a mistake in choosing cognitive dissonance as the lens through which to view social work stress instead of one of the more well-used theories such as vicarious trauma or burnout. One of the most salient beliefs of this theory is that we *reconcile* the dissonance. Essentially, we do what we need to do to alleviate the sense of discomfort that we experience when we have conflicting cognitions. How could I argue that social workers are a stressed out bunch if my theory argues that they alleviate their stress? As I carried forward with the research (turning back was not an option at that point), I realized two important factors. To begin with, the Theory of Cognitive Dissonance fits very well with my experience as a front-line social worker. In spite of the fact that for the past 20 years I have been surrounded by people who face value/behaviour conflicts that arise from working with childhood abuse, mental illness, death, and sickness on a daily basis, for the most part I have observed them doing what needs to be done competently and compassionately. They are reconciling the dissonance in a way that allows them to survive this

difficult work. This observation that social workers are managing their workplace dissonance is consistent with the previously-described literature on workplace stress which indicates that, in spite of high levels of workplace stress, social workers experience relatively high levels of job satisfaction (Collins, 2008; Gibson et al., 1989; Rose, 2003).

Secondly, I feel that this theory offers us an additional layer of understanding into workplace stress that is different from what other theories have to offer. Although social psychologists have described cognitive dissonance as a process that occurs on a subconscious level, I believe that we can consciously use our understanding of the mechanics involved to reduce our discomfort/tension in the workplace. Before going on to discuss these ideas, I will lay a foundation for them by describing my findings regarding the impacts of cognitive dissonance.

The impacts of dissonance. The findings of this study suggest that dissonance impacts social workers in primarily negative ways, leading me to believe that we could benefit by reducing it whenever possible. These negative impacts could be found in each of my interviews, sometimes stated overtly and other times interwoven throughout our discussions. I will note without embarrassment that it was the responses to this question that most often moved me to tears while I was analyzing my data and writing up my findings. I went into this research hoping for a list of medical diagnoses that could provide concrete evidence that cognitive dissonance is bad for us; however, what my participants gave me instead was a ready acknowledgment that this work has impacted them significantly on every level in ways that cannot be quantified. For example, as noted previously, over half of my participants described feelings of sadness associated with their work, with one noting, "Sometimes I can't even cry in situations where I should be crying. Um, and sometimes I cry in situations where I shouldn't be crying, you

know?" Similarly, many of my participants said that the work had intrinsically changed them. One shared, "I think you grow up quicker and I don't think you have that same naiveté that perhaps the rest of the population can settle in on. I think sometimes it's hard to laugh lightly". The researcher in me wanted to code these statements into quantifiable experiences; however, how can we truly understand the far-reaching impact of sadness? How can we capture the impact on a person of growing to view the world in such a way that it becomes difficult to laugh lightly?

Although I chose to conduct this research using the Western theoretical lens of cognitive dissonance, these findings were confirmed when I held them up against my Indigenous philosophical beliefs regarding wellness. According to traditional Indigenous Medicine Wheel teachings, we need to find balance between our physical, spiritual, mental, and emotional selves in order to be "truly happy, healthy, fulfilled, and balanced" (Gray, 2011, p. 216). One of the important ways that we achieve this overall balance is through living our lives in ways that do not put us into conflict with our values (Lane, Bopp, Bopp, Brown, & Elders, 1984). It is not surprising then, that when social workers are put in positions where they have conflicting values or where they must engage in behaviours that conflict with their values, they experience a lack of wellness. Although the Theory of Cognitive Dissonance offers us a new lens through which to view the experience of having conflicting cognitions, I find it both interesting and reassuring that ancient wisdom supports this learning.

It is important to note that the findings from my research also suggest that cognitive dissonance can impact people in positive ways. Tavris and Aronson (2007) note that the ability to reconcile conflicting cognitions can allow us to manage difficult situations while preserving our 'beliefs, confidence, decisions, self-esteem, and well-being" (p. 222). Our lives are rife with

the potential for dissonance, as echoed in the well-known words of M. Scott Peck (1978), "Life is difficult. This is a great truth. One of the greatest truths" (p. 15). In addition to the everyday stressors of life, social work is a challenging profession. However, in spite of these difficulties, I felt that all of my participants were healthy, functional people overall, in part because they were using cognitive dissonance as a coping mechanism. My findings suggest that, in addition to cognitive dissonance providing a way for people to cope with difficult work, it can prompt them to seek personal growth. For example, one participant described how she had reconnected with her First Nations culture as a way of managing her work. This finding is consistent with the previously-described literature on workplace stress that shows that social workers can be positively impacted by stress, for example experiencing post-traumatic growth (Gibbons et al., 2011). I believe that this finding speaks to the resilience of the human spirit and the ability of people to find ways to grow and change when needed.

Despite its sometimes-positive results, I think it is possible to conclude from my research that the largely negative impacts of dissonance make it something we should maintain an awareness of and try to minimize whenever possible. Although the whole premise of the Theory of Cognitive Dissonance is that we subconsciously find ways to reconcile the dissonance, I believe that, when it occurs chronically, it can have negative, long-term impacts on us spiritually, mentally, emotionally, and physically. Although a certain amount of dissonance is inevitable, I would argue that, rather than us passively allowing dissonance to be something that happens *to* us on an unconscious level, we can use our knowledge to consciously employ it as a tool for reducing workplace stress. I will discuss some of those ideas in the context of my findings in the coming pages.

Strategies for reducing dissonance. Embedded in my interview with each participant were examples of how cognitive dissonance surfaces in her work, suggesting that it is a shared experience amongst social workers, regardless of factors such as whether they are working rurally or in an urban area, whether they are employed by MCFD or a DAA, and whether they are Aboriginal or non-Aboriginal. However, although cognitive dissonance appears to be a shared experience overall, my research suggests that individual social workers manage it in diverse ways. In the previous chapter, I described the ways in which I observed my participants reconciling dissonance by changing behaviours or adding cognitions. Although these processes were done *subconsciously*, I believe that social workers can learn from these examples, finding ways to *consciously* change their behaviours and/or add cognitions as a way of decreasing work-place related discomfort/tension. Although this strategy may sound complicated, it is actually relatively straight-forward and will be discussed further in the following sections.

Strategically add cognitions. This research suggests that social workers can reduce dissonance by paying attention to behaviour-value conflicts and then mindfully adding cognitions in a way that allows them to honour important values. An example can be found in the different ways that the DAA social workers and the MCFD social workers in my sample seemed to view their roles in transracial adoptions. I began this research anticipating that DAA social workers would express more cognitive dissonance over being on teams where they were responsible for making transracial permanency plans than MCFD social workers. I made this assumption based on what I had previously learned about Aboriginal communities and individuals being opposed to adoption, having heard many times that for them adoption is a "dirty word". After recruiting my sample and realizing that all nine of my MCFD social workers were Caucasian and all ten of my Aboriginal social workers were employed by DAAs (with the

remaining two Caucasian social workers employed by DAAs), this assumption regarding my potential findings was strengthened even further. However, interestingly, none of the DAA social workers in my sample expressed value conflicts around their facilitation of transracial adoptions. These decreased levels of dissonance did not arise because their values were completely consistent with transracial adoptions, but because they had found creative ways of working in positions that required the facilitation of those adoptions while still allowing themselves to honour their other values. For example, as stated previously, several of the DAA social workers in my sample described how it was their agency's practice to only place with families that had, over a period of time, demonstrated their commitment and ability to maintain cultural plans. Additionally, some spoke about their belief that they were able to honour their values around supporting birth families prior to children becoming CCOs so that fewer children were made available for adoption. Then, if a child was placed for adoption, they felt confident that they had done everything they could to honour their values around connection. One described how her community had conducted the required ceremony to make a foster parent a community member as part of the adoption process. By creating these practices, these social workers found ways to decrease the distance between oft-competing values such as permanency and connection. Although this finding can be viewed simply as our unconscious mechanism for reducing the discomfort of dissonance, I feel that it suggests that one way to decrease dissonance is to pay attention to value-behaviour conflicts and consciously choose to add cognitions that honour importantly-held values.

 Strategically choose dissonance-inducing situations with the least weight. My research suggests that another way to reduce the discomfort/tension that arises from dissonance is to be strategic when you are choosing between situations that will potentially result in dissonance.

Previously, I described an important component of the Theory of Cognitive Dissonance: although Festinger created a neat equation to represent the total dissonance felt, he also noted that not all cognitions have equal weight (Festinger, 1957; Harmon-Jones & Mills, 1999; Nail & Bonieki, 2001). Certain elements are more important to us than others, meaning that not all experiences of cognitive dissonance are going to produce identical levels of discomfort/tension. My research suggests that social workers can use this concept to their advantage. An example can be found by again referring to my finding that none of the DAA social workers expressed dissonance from working on teams where they facilitated transracial adoptions. Although many of the MCFD social workers I interviewed expressed dissonance around their roles on permanency planning teams, a few had found ways to creatively do their work so as to minimize those value/behaviour conflicts. For example, one MCFD social worker described how she had intentionally aligned herself with the local Aboriginal communities, following their lead around placements. Although this choice resulted in the experience of other types of dissonance for this participant (i.e. personal values conflicting with organizational values, including a general feeling of criticism and alienation from MCFD management), she described how doing the work in this way helped her to feel less discomfort around her permanency plans that she otherwise would have. By doing her work in a manner that allowed her to experience fewer incidents of cognitive dissonance regarding transracial adoptions and a greater number of incidents of dissonance regarding organizational value conflicts, she appears to have been experiencing less discomfort overall because the cognitions involved bore different weights for her. This finding suggests that another way to decrease the discomfort from dissonance in the workplace is to be strategic around the types of dissonance-invoking activities you engage in: if you can choose

between two activities that result in dissonance, choose the one where you place the least personal value on the cognitions.

Strategically choose to change your behaviour. My research suggests that social workers can also be strategic in decreasing dissonance by specifically choosing to change their behaviours. Although changing your behaviour is the most difficult path towards dissonance reduction, based on my conversations with my participants, I would theorize that it is a very effective means. An example can be found in the make-up of my sample. As stated previously, all 10 of my Aboriginal participants were either currently or most recently working for DAAs. Some of those women had only ever worked for a DAA and others had previously worked for MCFD; however, in every case, a conscious decision had been made by that participant to work for a DAA because she felt that the values within the agency would more closely align with her values than those of MCFD. In speaking to those social workers, I had the sense not only that they experience less dissonance-related discomfort/tension in the workplace than their counterparts, but also that they have an overall higher sense of job satisfaction. This finding suggests that one method of decreasing dissonance is to consider changing your behaviour in a way that most allows you to align yourself with your personal values in the workplace.

Strategies for reducing dissonance within groups. This research also suggests that we can learn strategies for reducing dissonance by thinking about dissonance in the context of group membership. Up until this point, I have discussed the mechanics of cognitive dissonance within the framework of the individual experience, suggesting that dissonance can be decreased by choosing to work for an organization that holds values similar to yours; however, these mechanics can also be extended to the experiences of individuals within groups.

Festinger (1957) noted that group membership can be an important source of dissonance and a substantial amount of the previously-described research involved groups, although the findings were not discussed in the context of group membership. For example, the inaugural study on cognitive dissonance involving the "Seekers" essentially looked at dissonance as it is experienced by individuals with a distinct sense of group membership (i.e. a religious cult) (Festinger, Riecken, & Schachter, 1956). Similarly, the early studies involving university students also involved individuals with a distinct sense of membership within a specific cohort and, one could argue, a fair amount at stake in maintaining that sense of identity and belonging (Elliot & Mills, 1959; Festinger & Carlesmith, 1959).

More recently, Matz and Wood (2005) conducted three studies with university students, concluding that individuals do experience dissonance when they disagree with the widely-held beliefs (i.e. attitude heterogeneity) of the group they belong to. I believe that social workers should pay close attention to these findings because their work almost always occurs within a group (i.e. team, organization), thereby bringing with it an additional possibility for experiences of discomfort/tension: dissonance arising from conflicting cognitions stemming from your personal values/behaviours and the values/behaviours of your team/organization. Matz and Wood (2005) suggest three strategies for reducing attitudinal discrepancy within groups: 1. Joining a different group with attitudes that are consistent with yours, 2. Changing your attitude so you agree with those of the group, and 3. Influencing others to change their opinions to match yours. They concluded that, when these strategies were successful in shifting disagreement amongst group members, dissonance was reduced and participants reported minimal discomfort.

I believe that the social workers in my sample felt a distinct sense of belonging to one of two particular groups, DAA social workers and MCFD social workers, and that this sense of

group membership at times contributed to their dissonance. I began this research envisioning my sample as a "group" of 21 social workers involved in permanency planning for Aboriginal children, curious to see if I would sense the existence of two sub-groups within that larger group: Aboriginal social workers and non-Aboriginal social workers. However, midway through my interviews I realized that my participants did not share a sense of belonging within that larger group of 21 and instead they seemed to have aligned themselves into two distinct groups: MCFD social workers and DAA social workers. This sense came up in every interview, with my participants repeatedly articulating a sense of "us and them", of work being done "our way" and "their way". It is important to note that this sense of belonging to one of these groups did not necessarily translate into a sense of having values consistent with that group. As stated previously, the DAA social workers in my sample consistently expressed a sense of shared values with their employing DAA; the MCFD social workers, on the other hand, at times expressed a sense of having very consciously aligned themselves with the local DAA/Aboriginal community as a way of coping with disparate values/behaviours within their organizations. I spent a significant amount of time pondering what this finding could mean, not only in the context of social work practice, but also through the specific lens of cognitive dissonance, particularly dissonance reduction.

As stated previously, Matz and Wood (2005) suggest three strategies for reducing attitudinal discrepancy within groups, 1. Joining a different group with attitudes that are consistent with yours, 2. Changing your attitude so you agree with those of the group, 3. Influencing others to change their opinions to match yours. However, when we apply these suggestions to front-line work, several questions come to mind: What happens when we have limited choices and have to work for an organization that has values that conflict with ours?

When our employing organization matches our values in many ways but not in every way? When we must work towards a common goal with people from other groups who have differing values? I believe we can find some insight into these issues by looking at what my participants shared with me in the context of Matz and Wood's (2005) suggestions.

1. Joining a different group with attitudes that are consistent with yours. Previously, I suggested that one way to reduce dissonance in the workplace is to choose an employing organization that most closely fits your values. However, I think it is important to ask how we can reduce dissonance when we cannot/do not wish to change our place of employment. Five of my nine MCFD participants expressed ways in which they had aligned themselves with their local DAA and/or Aboriginal community as a way of coping when their values conflicted with MCFD values. Although they met with various levels of success in forging these connections, at the very least those social workers could add to the cognition, *I am doing my best.* This finding suggests that, if you are experiencing dissonance related to the values of your organization and do not want to change jobs, an alternate route to dissonance reduction is to align yourself with an outside group that has values that are consistent with yours while still remaining within your primary group.

2. Changing your attitude so you agree with those of the group. My research suggests that one way to decrease dissonance within groups is to acknowledge all levels of group membership and then identify ways in which values are shared amongst those groups. Within my interviews, I did not find evidence of social workers having changed their values/beliefs so that they could be in agreement with their own groups; however, what I did find was that, although the MCFD and DAA social workers in my sample repeatedly described their work in the context of "us and them", my impression from our conversations was that there was more

attitude homogeneity between them than what they seemed aware of. For example, one shared value involved the need for them to do everything they can to ensure the best outcomes for children. The women I interviewed told me in very moving ways both the way in which this work is a calling and the way in which it burdens and changes them. I was left with the sense that there is a shared experience in them truly wanting the best for the children they are tasked with planning for, in struggling with knowing what is in a child's "best interests", and in bringing that about within complicated systems and legislation.

Another shared value revolved around the belief that children need stability and consistency in their lives. Admittedly, there were differences in how they envisioned that occurring. Some of the social workers felt permanency through legal adoption was the best route. Others felt that options such as 54.1 family placements (discussed in Chapter 1) were the best choice. A few expressed the belief that, if a foster placement was stable and offered cultural connections, that would also be an appropriate route. Still, there was consensus that children should not be moved from foster home to foster home and then age out of the care system.

A third shared value was held around the importance of connections to birth family, community, and culture, with my participants expressing an understanding of the importance of these connections for healthy identity formation and a recognition of how difficult it is to keep children genuinely connected while in care. For example, nearly all of my participants eloquently discussed the issues with cultural plans: that it is difficult to create connection through a piece of paper, that families often do not carry through, and that it does not make sense to approve a family as an "Aboriginal" adoptive home when that identity primarily surfaced as a way of increasing placement opportunities.

From my outside perspective, my participants shared a group membership (social workers involved in making permanency plans for an overlapping cohort of children) as well as many important related values; however, I sensed that one major source of dissonance, which was also a barrier to timely planning for children, was each social worker's perception that she only holds the smaller group membership and is therefore pulling in the opposite direction as the other group. Over time, those situations have the potential of resulting in an underlying belief that we are on different sides; however, in spite of the different weights that my participants gave to needs such as permanency, there was evidence of some very important common ground. As idealistic as it may sound, I was left wondering if social workers could shift their thinking to embrace their group membership in a larger context (i.e. membership in a group of BC permanency planning social workers versus a DAA or MCFD) and then fully and openly consider the values held by others within the group (i.e. timely planning for children in care). This shift could result in decreased group-related dissonance as well as improved planning for children.

3. *Influencing others to change their opinions to match yours.* Although this strategy for reducing dissonance sounds somewhat manipulative, I believe social workers can effectively employ it with transparency and humility. My research suggests that one way to do this is for social workers to choose values that they consider truly important and then work to educate others around them regarding the importance of upholding those values. For example, one of my MCFD participants described how she had experienced a sense of personal enlightenment around the importance of identity and cultural connections and then had embedded that learning into her personal life and work (i.e. advocating for cultural training within MCFD, giving public talks on the importance of culture/identity). This finding suggests that one way to reduce group-related

dissonance is to try to educate those around you regarding your importantly-held values as a way of bringing others' values in congruence with yours.

Looking at this suggestion from a broader perspective, I would suggest the sharing of training and education between and within MCFD and DAAs on topics such as outcomes for children in care, the historical and current impacts of colonization, culturally respectful practice, and the experiences of transracial adoptees. In the years that I worked for MCFD, there were very few times when research and/or literature on topics such as these were discussed and, consistent with this experience, there were few times within my interviews that social workers brought research-based information into our discussions. I have been extremely fortunate in my academic endeavours to have had the luxury of exploring literature on some of these topics and I cannot help but wonder how it would impact our sense of shared group membership/values if some of that information became common knowledge. For example, although various values were expressed amongst my participants regarding children growing up in foster care, ranging from some claiming it is a form of colonization to others claiming that it is acceptable as long as the foster home is stable and culturally-attuned, research indicates quite strongly that children do not have good outcomes when they remain in foster care (see RCY, 2014b). In addition, although strong values were expressed by some of my participants regarding the importance of attachment, as stated in chapter 3 of this dissertation, the literature on attachment shows that it is a Western concept that may not be applicable to all cultural groups (Carriere & Richardson, 2009; Neckoway, Brownlee, & Castellan, 2007). Perhaps sharing such information would help social workers in both groups to establish an increased sense of shared values/beliefs, an increased sense of belonging to a group dedicated to strong permanency-planning outcomes for children, and a decreased sense of individual, group-related dissonance. In conclusion, just as I

feel that social workers can use their knowledge of cognitive dissonance to reduce their discomfort/tension on an individual level, I feel that they can use this knowledge to reduce their dissonance within groups.

The pyramid of choice: Keeping your values intact. I want to make one final point regarding how we can use our understanding of the Theory of Cognitive Dissonance to our advantage in the workplace. It is not reflective of anything I observed in my participants or of any judgment I have made based on our conversations.

It would seem unethical to write a dissertation on cognitive dissonance without discussing one of the predominant findings of modern social psychologists: cognitive dissonance can cause you to engage in behaviours that contravene your values and ethics and can actually change the very core of your beliefs. In order to understand this possibility, we need to reflect again on the three possible paths that we can take towards dissonance reduction: 1. We can change our behavior to bring it in line with the dissonant cognition, 2. We can attempt to justify our behavior through changing one of the dissonant cognitions, or, 3. We can attempt to justify their behavior through adding new cognitions (Aronson et al., 2007). The first path, changing your behaviour, is the most difficult to accomplish; however, it allows you to hold to your beliefs because it does not require adding a new cognition. The second two paths involve adding a cognition and essentially involve us finding ways to cognitively justify our behaviours or thoughts. I feel it is important to acknowledge that, although I previously suggested ways in which we can strategically use our knowledge around the mechanics involved in dissonance reduction to our advantage, subconsciously reducing dissonance can have the negative impact of causing us to change the core of our values.

In the context of this research, it is important to note that the literature on cognitive dissonance supports the idea that working at a job that conflicts with your values can actually change your beliefs at their core, impacting how you react to difficult moral decisions in the future, and causing you to behave either more or less ethically. For example, Judson Mills' (1958) experiment on grade 6 students showed that, after students cheated, they felt more lenient towards cheating than they had before they cheated. Their dissonance reduction around their behaviour had essentially changed their values around cheating. Over a period of time, this process of dissonance reduction can actually cause us to change the core of what we believe in. In their aptly-named book, *Mistakes Were Made (But Not By Me)*, Tavis and Aronson (2007) discuss the pyramid of choice: we start at the top of the pyramid with a set of values and ethical guidelines and, each time we make a decision that conflicts with our values and then justify that choice in order to alleviate our dissonance, we move further and further down the pyramid until we find ourselves acting in ways that we would never have imagined from the top. Examples of this phenomenon can be found throughout history and even in our own communities and families. How does the happily married mother of two, community volunteer, and faithful church attendee get convicted of embezzling $100,000 from her employer? Not by arriving at work one day and deciding to embezzle $100,000, but by deciding to take a small amount (*I worked unpaid overtime and deserve it*), then another (*this company has so much compared to me*), then another (*I will pay it back soon*), until one day she finds herself imprisoned for something she thought she would never do.

The need to stay true to your values in spite of the difficulty of the work is echoed in the words of one of my participants, a practicing social worker, manager, and trainer for over 35 years:

I've done training now in the States and across Western Canada and Europe and Australia and that's what I'm finding is social workers got into their profession, um, with a great education and great values when they start and they get into the government systems and they have to compromise themselves. They're not allowed to think for themselves. They're not allowed to use their gut feeling anymore and that's actually, that's the crux of it and I keep telling people…there are 4000 of you. Stand up! Say what's right. You know what's right. They're so scared to not do this or that and there's no policy telling you, you have to do that. The system has taken over and somehow imploded on itself. We don't have, I hear, I don't have time, I don't know how to do that, my supervisor won't support me to do that. But they also know it needs to get done. It's - and I do think you're probably speaking to some very big-hearted social workers who are doing their best. I see that all the time, too. That are just absolutely all-out trying as much as they can, running as fast as they can, but if they could slow it down a bit from the beginning, um, it would be a lot easier about permanency when it came to that because the family would be leading it. (DAA SW)

For this reason, I believe social workers should invest time and energy into being aware of their own values and how these are impacted by their work. In addition, because it is our natural tendency to engage in dissonance reduction on a subconscious level and therefore remain unaware of it, we may also want to heed Tavris and Aronson's (2007) suggestion that we enlist the support of others to help us maintain an awareness around our values: "We need a few trusted naysayers in our lives, critics who are willing to puncture our protective bubble of self-justification and yank us back to reality if we veer too far off" (p. 66). I believe that by staying vigilant regarding our values/behaviours as well as by asking others to hold us accountable, we

have the greatest chance of living lives that allow us to honour our core values.

I started this research study with a broad understanding of the Theory of Cognitive Dissonance and how social workers might apply it to their practice. After interviewing my participants and analyzing my data, I have come to several conclusions. To begin with, my research suggests that social workers do experience cognitive dissonance. When experienced as a subconscious process, it has many negative impacts, including the potential to change the core of our values and cause us to act in ways that go against the core of who we are and who we want to be. However, when used as a conscious strategy, this theory has the potential to benefit social workers by offering ideas for decreasing discomfort/tension in the workplace while keeping core values intact.

Suggestions for Future Research

While working on this research study, I came across several subjects that I feel would be worth exploring in the future. Although the theory of cognitive dissonance has been researched by social psychologists since the 1950s, that research has focused on specific areas, leaving many exciting, unexplored topics

Cognitive dissonance and social work. Given the lack of research on cognitive dissonance in social work, the intersection of these is one obvious topic for further research. This dissertation is one of the first to explore this area and I believe it is only a starting point. It would be interesting to look at cognitive dissonance in other social work settings such as medical social work and child protection. I also feel that my research design could be improved, given what I learned from this experience, to create some further refined studies, for example around the ways in which social workers are impacted by cognitive dissonance. In this dissertation, I have suggested that social workers consciously employ the mechanics of dissonance reduction

and I have offered several strategies for doing so. It would be interesting for research to be conducted on whether or not these strategies are actually successful in decreasing workplace stress.

   Impacts of cognitive dissonance. I feel further research should be conducted on the impacts of cognitive dissonance, both quantitatively and qualitatively. The idea of being able to learn more about how people are impacted by dissonance by simply asking them about their experiences is relatively new to social psychologists and I feel a great deal of information can be gleaned by continuing to ask these questions. With that being stated, I must also admit that I was surprised by how difficult it was to ask my participants probing questions in this area. I think this difficulty arose for two primary reasons. First, it goes against my own personal and professional values to ask intrusive questions before creating relationship, a task difficult to achieve when meeting a participant for the first time. The inquiry around impacts deals with private and sensitive information and, while I felt comfortable asking open-ended questions, I did not want to be overly intrusive by probing too far past my participants' initial responses. Secondly, I am not sure that a single, semi-structured interview is the best data collection tool to use to elicit this type of information. Perhaps a tool that either allows for the creation of more relationship and safety (i.e. several interviews over a period of time) or more anonymity (i.e. a survey) would allow for a richer level of data than what I was able to capture in my interviews. I also suspect that a tool that allows for a deeper level of data collection than a single, semi-structured interview might turn up some specific impacts that were not captured in this research. For example, based on my personal experience and what I have heard from my peers in the past, I suspect that social workers experience more anxiety-related impacts than what I found through my interviews.

Vicarious cognitive dissonance. This area has only recently begun to be explored, with researchers asking whether or not people can experience dissonance when they observe others acting in a way that is inconsistent with their values (Cooper, 2007; Cooper & Hogg, 2007; Norton et al., 2003). Cooper (2007) asserts that this vicarious dissonance assumes a common group membership, pointing out that when we share group membership with someone, that person takes on a part of our identity and we a part of theirs. In the same way that we are motivated to see ourselves and our own actions positively, we are also motivated to see our group members and their actions positively. Although research in this area is just emerging, it intuitively makes sense that social workers may experience this type of dissonance. As stated previously, in my experience, social workers identify strongly with their profession and with their larger group membership. The nature of the social work profession, where people experience and then debrief difficult situations/decisions could leave co-workers open to experience dissonance vicariously. I believe that further research should be conducted in this area.

Cross-cultural dissonance. Most of the existing research into cognitive dissonance has involved young, middle class, Caucasian people, many of them university students, leaving us to question whether or not this research can be applied to others of different cultures and races. Some limited research has been conducted into how non-Western cultures experience cognitive dissonance, suggesting that its experience may not be universal, but may be related to the individualistic nature of Western culture. For example, research conducted on temporary Japanese students at the University of BC showed that they experience cognitive dissonance somewhat differently than their Western Canadian counterparts (Cooper, 2007). While it is not within the scope of this paper to discuss that somewhat complex study, it does leave us to

question whether or not social workers from Western backgrounds experience dissonance differently than social workers from other cultural backgrounds. These findings may be important in research conducted with Aboriginal social workers, given the previously-mentioned belief of many Aboriginal people in the idea of collective selves.

Different experiences between Aboriginal and non-Aboriginal social workers. Although my sample included both Aboriginal and non-Aboriginal social workers, it was not my intent to capture differences between the two. Interestingly, though, it was my general sense that the social workers from the DAAs (ten Aboriginal and two non-Aboriginal) experienced cognitive dissonance somewhat differently than their MCFD counterparts (nine non-Aboriginal), were more likely to say that their values aligned with that of the DAA, and seemed "happier" or more "content" in general. It is difficult to know whether or not this sense can be attributed to cultural background, to the organizational differences between MCFD and DAAs, and/or to the fact that all of the DAA social workers in my sample chose that work because it aligned with their values and beliefs. My sense was that the information the two non-Aboriginal DAA social workers in my sample shared with me was much more similar to the other, Aboriginal DAA social workers in my sample than to the non-Aboriginal MCFD social workers, which may suggest that some of the differences I noted were more closely linked to organizational ties than to cultural background. It would be interesting to conduct further research into this area, particularly involving a sample that includes Aboriginal MCFD social workers.

Cognitive dissonance in a political context. As stated previously, it was not within the scope of this research study to provide a political analysis of Aboriginal transracial adoption, nor to look at how the experience of cognitive dissonance is impacted by the colonial context of

these placements. The intersection of colonization, power, Aboriginal transracial adoption, and cognitive dissonance may provide an interesting and important area for future research.

Recommendations for Practice

One of the primary goals of this research was to provide recommendations around how organizations can better support social workers in the field. Although my findings did lead me to make some conclusions in this area, it also lent to some thoughts regarding how social workers can personally work towards decreased dissonance and improved health.

Organizations and individuals to utilize the Theory of Cognitive Dissonance. Throughout this chapter, I have discussed my findings in the context of strategies social workers can employ to reduce the discomfort/tension that arises from dissonance. In addition to these specific suggestions, I would make a general recommendation that social services organizations and post-secondary institutions create environments where both values and cognitive dissonance are topics of conversation. Reflecting on 20 years of front-line social work practice, I cannot remember even one time when values were overtly discussed in the workplace. My research suggests that social workers are impacted by their values and beliefs and I believe a starting point to decreasing workplace dissonance is to acknowledge this potential. My research also suggests that social workers experience cognitive dissonance when their values clash with their organization's values. I believe that having transparent conversations could be one step towards finding common ground and possibly aligning some of the dissonant values between social workers and the organizations that employ them. These conversations could be embedded in social work culture through both post-secondary and workplace training, in practicums, and in clinical supervision. The previously-discussed literature on social work stress cited workplace supports/supervision as a way for decreasing workplace stress, including educating workers

about signs of workplace stress and monitoring them for signs of stress (Collins, 2008; Kim et al., 2011; Michalopoulos & Aparicio, 2012; Sprang, Craig, & Clark, 2011; Storey & Billingham, 2001). I believe this research and my recommendation fit well together.

I recommend that social workers learn about cognitive dissonance and create a conscious awareness of their personal values and behaviours, striving to be aware of how and when these conflict. A task as simple as creating a list of values and posting it by your desk could help in this area. In addition, journaling a list of your values along with ways in which you do and do not honour them can help increase personal awareness, as well as listing ways in which you can change your behaviour to more closely align with your values.

Organizations and individuals to access existing research. I recommend that both DAAs and MCFD access existing research on permanency planning and use that research as a way to improve service delivery, increase consistency in practice between both organizations, create a sense of shared values/beliefs, and decrease both individual and group-related dissonance. Although this goal may seem lofty, it could be as simple as both MCFD and DAAs heeding already-existing advice on how to improve child welfare systems. For example, the RCY (2014a) report, *Finding Forever Families: A Review of the Provincial Adoption System* addresses all of the organizational themes that arose in Chapter 4, including issues around time and around the need to work within systems that provide adequate levels of structure and that support Indigenous knowledge. This report addresses the significant time-delay in placing children in care for adoption while at the same time making recommendations for how MCFD can better create partnerships with those children's Indigenous communities at both systemic and front-line levels. For example, the report recommends that MCFD "work collaboratively with delegated Aboriginal Agencies to develop an Aboriginal-specific permanency planning strategy,

including the development of a provincially delegated Aboriginal adoption agency and

Aboriginal permanency committees in each of the four regions, with a focus on timely

permanency plans for Aboriginal children" as well as "ensure all adoption and guardianship

workers have mandatory cultural competency training as well as additional support and

specialized training in managing the complexities of adoption planning in First Nations and

Aboriginal communities" (Representative for Children and Youth, 2014a, p. 79). Perhaps

resources such as this one can help social workers, managers, and policy-makers find ways to

create permanency for children in timely ways while care is taken to build and maintain solid

relationships.   In the context of this research study, finding pathways to balance out competing

values within organizations can essentially result in social workers experiencing fewer instances

of dissonance.

Another publication worth paying attention to is the RCY's report, *On Their Own:*

Examining the Needs of B.C. Youth as They Leave Government Care (2014b) which addresses

the issues of children who leave care without permanency plans and again offers succinct

recommendations for how we can bring about improved outcomes. This information has been

compiled by a respected organization, it has been made easily accessible, and yet my impression

is that the findings are often ignored by those in the position to implement change.

An additional report well-worth paying attention to is Jeannine Carriere's (2007) MCFD-

funded study on BCs existing cultural planning policy. Carriere interviewed adoptive parents,

Aboriginal community representatives, and Aboriginal youth, providing five final

recommendations, including the provision of increased follow up and support for transracial

adoptive families. I would highly recommend that Carriere's (2007b) report be revisited by both

MCFD and DAAs involved in transracial adoptions and that her recommendations be implemented not in a cursory way but with genuineness.

I also recommend that policy be amended to allow for changes around cultural planning for Aboriginal transracial adoptees. The 1996 *Adoption Act* was progressive for its time but I believe that changes must be made to address issues that have surfaced, such as the lack of carry through on cultural plans on the part of adoptive parents. My study suggests that one of the predominant issues both MCFD and DAA social workers face around transracial adoption planning for Aboriginal children is the shared acknowledgment that adoptive families often do not carry through with these agreements. My participants cited this pattern as impacting them on an ethical level (because they are facilitating these placements without knowing if families will carry through) as well as on a practical level (because communities are becoming less willing to agree to transracial adoptions than they were previously based on the lack of follow-through).

Organizations and individuals to increase knowledge. I recommend that social services organizations and post-secondary institutions increase training around topics such as culture and identity-formation. Both the MCFD and DAA social workers in my sample said they often found that other MCFD social workers did not fully understand these issues, making it difficult to plan for children as a team in a timely and effective way. Reflecting on the one session of cultural sensitivity training I was offered in my 20 years of practice, I would recommend that funding be invested in regular, effective, experiential cultural training.

I also recommend that each social worker make it part of his/her personal mission to create an increased and ever-developing understanding of cultural/identity issues. My experience tells me that social services organizations often do not offer us the training and support that we need around these issues and I feel that if we are going to continue facilitating

permanency plans for Aboriginal children we must take responsibility for our own learning and embrace it as an ongoing process. This learning can take place through various means such as attending community events, taking the time to build relationships with people of other cultures/races, and watching documentaries/reading books that explore culture/identity issues.

Organizations to offer increased flexibility and guidelines. I recommend that organizations that facilitate transracial adoption plans offer both increased flexibility and clearer guidelines around adoption planning for front-line workers. Although this statement may seem contradictory, I believe it is possible and imperative to provide both. My research suggests that social workers experience decreased dissonance when their employing organizations allow them to work in ways that are consistent with their values such as a belief in taking time to build relationships. I believe social workers would benefit from employers that encourage them to both articulate and honour those values in ways that still provide for timely planning for children. In addition, I believe that DAA social workers in particular could benefit from transparent conversations/guidelines around expectations for permanency planning so that they are not left feeling isolated in their work.

Organizations and individuals to nurture connections. I recommend that work be done to improve the existing relationships between MCFD and DAAs on every level. Although this suggestion may seem to present a high goal, I believe that it can be achieved and that we must work towards it if we are to improve outcomes for Aboriginal children in care. Although a growing number of Aboriginal communities have full or partial delegation to provide child welfare services for their own children and many more are working towards delegation, the fact remains that many Aboriginal children in care come into contact with both MCFD and DAAs. It makes sense to me for us to work towards there being positive relationships between all the

decision-makers in a child's life. I believe that a starting point would be for space to be created for social workers from both organizations to spend time together and work on the development of genuine relationships. Although that idea might seem simplistic, I feel that many of the perceived value-conflicts that take place are at least somewhat based on a lack of understanding between individuals and organizations and that creating relationships and sharing information and perspectives could help us to find common ground and common values. I recommend that social workers work individually on a daily basis towards finding common ground with their counterparts, using some of the most fundamental social work skills such as empathy, acknowledgement of power differentials, reflexivity, empowerment, and humility.

Conclusion

I would like to close this research study by leaving my readers with a few thoughts. Although I have dissected the mechanics of the Theory of Cognitive Dissonance and I have offered very specific ways that social workers can consciously decrease their dissonance in the workplace, I realize that people get busy and might not always make the time to heed that advice. The good news is that I believe social workers can benefit from a somewhat-simplified strategy of dissonance reduction. This strategy would involve simply paying attention to your personal values, noticing when those values conflict with workplace values/behaviours, and then thinking about what action you want to take to align those values/behaviours. You might decide that a specific value is so important to you that you want to do everything you can to preserve it. You might decide that you want to make adjustments to your thinking or behaviour to allow you to honour other values. You might even decide to re-evaluate your values after considering other perspectives. I would argue, though, that simply maintaining an inventory of your values, a

sense of "who do I want to be?", and "how can I be the person I want to be?", can provide social workers with an ethical compass in the difficult work they undertake.

I feel these steps are important because, in spite of the fact that my research suggests that social workers are finding ways to subconsciously reconcile dissonance, I cannot conclude this study by theorizing that the ability to reconcile dissonant cognitions equals workplace bliss. I feel that chronically having to reconcile conflicting cognitions has the potential to create wear and tear on individuals over the years. Arguably, every human being faces the potential for cognitive dissonance. We can all relate to the example of the smoker used earlier in this thesis, whether it is because we struggle with smoking or eating too much sugar or gossiping or any other behaviour that conflicts with our values or whether we know other people who engage in behaviour that they justify in spite of the fact that it contravenes their values. However, I would argue that for social workers the experience is more frequent, with deeper ramifications, than what the average citizen experiences. Tavris and Aronson (2007) echo this belief, noting that the stakes for those involved in the healing professions are especially high:

> If you hold a set of beliefs that guide your practice and you learn that some of them are mistaken, you must either admit you were wrong and change your approach, or reject the new evidence. If the mistakes are not too threatening to your view of your competence and if you have not taken a public stand defending them, you will probably willingly change your approach, grateful to have a better one. But if some of those mistaken beliefs have made your client's problems worse, torn up your clients' family, or sent innocent people to prison then you…will have serious dissonance to resolve. (p. 101-102)

My hope is that this study can provide society some insight into the stressors faced by social workers as well as provide social workers with some thoughts about how we are affected when our values, beliefs, and behaviours conflict and how we can use that knowledge to stay well in spite of this difficult work.

I introduced this research study by sharing that I facilitated transracial permanency plans for Aboriginal children for almost 20 years. My discussions with my participants gave me a great deal to reflect upon regarding that work and, at the end of the day, I have to admit, "While I would like to think I am not a modern day missionary, I don't honestly know" (Hart, 2003, p. 308). I will say, though, that *I can see positive outcomes* in the children I placed for adoption within my community, *I did my best*, *I am willing to answer for my actions*, *my plans were better than the alternatives available* to me, *I tried to bring change from within* and, yes, I will admit that I did often feel that *I was more capable than others* of struggling with the enormous task at hand. I have thought many times through this dissertation process that this research study may be my intent at penance around my growing knowledge that this reasoning may not be enough. When viewed within the context of cognitive dissonance, maybe that is my attempt at alleviating the discomfort arising from my dissonance: by adding the cognition that I will spend the rest of my career researching topics that have the potential to impact Aboriginal children in care, and all children in care, in positive ways.

It is not without some sadness that I have come to the conclusion of this research. Part of me wants to continue connecting with my participants, and others, over this interesting topic. Part of me wants to continue reflecting upon and sharing their experiences. And yet, as the saying goes, all good things must come to an end. So I will leave you, my reader, with this piece of research – in essence, my personal Métissage. And in doing so, I reflect on the ultimate

question for me as an Indigenous researcher: Did I do it to the best of my ability, with a good heart? I can honestly say that I did and I hope you receive it as such and that in some way we have managed to open up a conversation about the health of social workers and maybe, through our own health, to contribute to the health of children in care.

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Appendix A: Sample Non-identifying Cultural Plan

Cultural Safety Agreement

Components of a Cultural Safety Agreement (delete this after)

Childs Name: **D.O.B**

Date of Plan:
Annual Review Date:
Adoptive Parents:
Address:
Telephone:
Email:
Community Contact:
Agency:
Address:
Telephone:
Website:

Child's Bio and Photo

Here is a unique opportunity for you to share your child's photo along with his/hers likes, hobbies, show case any artistic abilities painting, musical talents, cultural dancing or storytelling, athletic abilities. Keep it child friendly, positive and happy, something the child may look at when he/she is older and feel good about themselves.

Overview of Adoptive Family

- Relative experience to being a parent, or steps taking to assume the role of one.
- Work history
- Community involvement, contact with any community resources?
- Share any connection or awareness to First Nations or Metis Culture

Contacts for (Childs name) with
Birth Family and community

Birth Family Member's Name	Relationship *(Paternal or Maternal Grandmother, aunt, uncle)*	Contact Information
John Smith	Paternal Grandfather	
Jane Bay	Maternal Aunty	

Family Members who *do not have* contact with (Childs name) and Why

Birth Family Member's Name	Relationship *(Paternal or Maternal Grandparent, aunt, uncle)*	Reason for no Contact
Jim Bay	Maternal Uncle	Will not have contact if the child's Biological father is involved.

List of other contacts who support Child and Adoptive Family

Community Contacts	Agency	Contact Information
Name, Title	Metis Society	Phone/email/webpage
	Indian Band	
	Counsellor	

Agreements

The Child's Indian Band or Metis Community Agrees to:

Identify a contact person who will be responsible for maintaining contact with the Child and Adoptive parents as follows:
- Provide support to secure first nations status or metis citizenship
- Forward cultural package: info on cultural history, language, music, story books of traditional teachings, games, crafts, and traditional foods and preparations.
- Arrange yearly visits with child to ensure cultural development.
- Email the monthly First Nations Band or Metis Cultural Activities Calendar to the Child and Adoptive parents.
- Notify when the First Nations Band or Metis community is hosting cultural events and activities.

Adoptive Parents Agrees to:

- Maintain contact with First Nations Band or Metis Community and Extended Family. (Be specific, <u>how</u>: visits, phone, email and <u>when</u>; how often)

- Enroll Child in cultural programs offered within the community(give specifics; event title, dates and time)
- Participate with child in local First Nations or Metis community Events (give specifics; event title, dates and time.)
- Enroll child in language classes that apply to him/her
- Learn and incorporate traditional foods in child's diet
- Incorporate the contents of the Cultural Package (books, music, language) provided for Child into the child's daily routine.
- Maintain a lifebook and/or cultural scrapbook of child's community
- Register child/youth as an Aboriginal student for access to Aboriginal Education worker.

Siblings/Extended Family Contact

Adoptive parent will facilitate contact between child and birth family by:
- Arranging visits with Siblings and Extended family by; phone calls, Skype, letters and photo exchange (Again be specific on how each one of those would look like)

Conclusion

Should any of the parties contact information change they will keep the other parties informed and update as required.

Please add any other closing remarks.

Cultural Plan Review

The following signatures confirm that the information contained in this Cultural Plan supports (Childs Name) in maintain his/her Cultural Identity as First Nations/Metis person. As well, the persons signing agree to fulfill their parts, as laid out in this document.

Adoptive Parent Printed Name	Signature	Date
Agency Representative Printed Name	Signature	Date
Family Member Printed Name	Signature	Date
Family Member Printed Name	Signature	Date
Band Representative Printed Name	Signature	Date

Appendix B: Interview Guide

1. Please can you tell a bit about your educational background.

2. How would you describe your cultural background?

3. What types of social work positions have you held and where have you worked?

4. I'm curious to hear the story of how you ended up working as an adoption/permanency social worker. Can you tell me a little bit about that? What motivated you to do this work?

5. What do you think your understanding was of the colonization of BC's Aboriginal people before you came to this work? Has that changed at all during the course of this work?

6. Do you find that you think about the possible link between the history of colonization and adoption planning during the course of your work?

7. What's it been like for you to facilitate transracial adoption plans for Aboriginal children?

8. What have been the biggest struggles of this work? Can you tell me about the worst experience you've had?

9. What have been the biggest joys and/or accomplishments? Can you tell me about the best experience you've had?

10. Do you feel that your non-Aboriginal/Aboriginal cultural background impacts your work? In what way(s)?

11. Can you think of times when your values, thoughts, and/or actions don't fit together in relation to this work?

12. How did that impact you?

13. How do you think you cope with it? Can you give me examples of both healthy and unhealthy coping strategies that you've used?

14. Where do you turn for support? Do you feel the support you have is adequate? What would help you feel more supported in the work you do?

15. I'm curious to know if there are times when you've changed your actions/practice at work so it would fit better with your values and beliefs?

16. I'm also curious to know if there have been times when you've minimized how you felt about something at work so that it would fit better with the rest of your values, thoughts, or actions.

17. Along the same lines, I'm wondering if there are other thoughts or beliefs that you keep in your mind at work in order to balance out some of the mixed feelings you have about doing this work?

Thanks for taking the time to share your story with me. I'm going to leave you with these questions in case you think about anything more over the next while. I'd love to hear from you if any other thoughts arise. You can email me at burke@unbc.ca.

Appendix C: Information Sheet

Cognitive Dissonance and Permanency Planning: The experiences of social workers who facilitate transracial adoptions for Aboriginal children in British Columbia

Information Sheet

Susan Burke   Dr. Glen Schmidt
250-961-7202   250-960-6519
burke@unbc.ca   schmidt@unbc.ca.

Dear Participant,

You are invited to participate in a research project conducted by Susan Burke, a graduate student in the Health Sciences program at the University of Northern British Columbia. The purpose of the study is to learn more about the experiences of social workers who facilitate transracial adoptions for Aboriginal children. Another goal of this research is to highlight how those social workers can be better supported in the workplace.

Your participation is requested because you are an adoption/permanency planning social worker employed by MCFD or a Delegated Aboriginal Agency. It is important that you know that you are being asked to represent your own perspective and not the perspective of the agency/organization that employs you. Should you agree to participate, you will be asked to describe your experiences in facilitating transracial adoption plans for Aboriginal children during a single semi-structured interview. The interview will be approximately one hour and can occur in person by telephone, or via Skype.

RISKS
There are potential legal, social, and psychological risks associated with participation in this project. Participants may experience emotional or psychological distress by discussing their work in the context of colonization. Those requiring it can seek support through the Prince George Native Friendship Centre, the UNBC First Nations Centre, their Employee Assistance Program, or a private counselor. There is no financial remuneration for your participation; however the researcher will provide a small gift in thanks.

BENEFITS
Your input will add to what is known about the stress occurred by social workers who facilitate transracial adoption plans. It could potentially improve knowledge and services regarding how social workers are supported in the field.

VOLUNTARY
Participation is voluntary and you may refuse to answer questions. If you need to withdraw at any time, you may do so without prejudice. Any information you provided will be destroyed at that time.

CONFIDENTIALITY

The information you provide will be reflected in the final thesis as well as presentations and publications. Anonymity cannot be guaranteed but a series of measures will be used to protect anonymity. Specifically, your anonymity will be maintained by removing identifying details connecting you with your responses. Your name will not be stored on file. Instead a code number will be used to protect your identity and the key linking your initials to the data will be stored separately on a password protected file and will be destroyed after the project is complete. If you choose to participate via Skype (which is not housed in Canada), your anonymity and confidentiality may be at risk.

During the project, interview recordings and transcripts will be stored on the researcher's personal computer with a secure login, password protection, and anti-virus software. Hard copies will be stored in a locked cabinet in a locked office at the researcher's home with access only to the researcher. Once the research is complete, recordings and electronic files stored on the researcher's computer will be deleted and transcripts will be incinerated. All identifying information will be deleted. The electronic file of analyzed data will be password protected and stored on a UNBC committee member's computer account at UNBC. This account is located on a secure server with password and anti-virus protection. The stored electronic file will be deleted five years after the study is completed.

An exception to confidentiality is disclosure of a child in need of protection that has not been reported to the Ministry of Children and Family Development (MCFD). Under this circumstance, the researcher must report this information to MCFD according to legal and ethical obligations.

CONTACT INFORMATION

If you have any questions about this study, please contact the researcher, Susan Burke, at 250-961-7202 or burke@unbc.ca. You may also reach Dr. Glen Schmidt, supervisor, at 250-960-6519 or schmidt@unbc.ca. A copy of the thesis will be available after completion of the research in July 2015 and will be provided by contacting Susan at the phone number or email above. If you have any complaints about this research, please direct them to the UNBC Office of Research at 250-960-6735 or reb@unbc.ca.

Your signature below indicates that you have read and understood the above information. You will receive a copy of this form. Whether or not you choose to participate in this interview, I would like to thank you for your time spent in reading over the above information.

With warm regards,

_____   _____
Signature   Date

Appendix D: Informed Consent

What are the experiences of social workers who facilitate transracial adoptions for Aboriginal children in British Columbia?

Informed Consent

INFORMED CONSENT

I understand that Susan Burke, Ph.D. student in the Health Sciences Program at the University of Northern British Columbia, is conducting a research project on the experiences of social workers in BC who facilitate transracial adoptions for Aboriginal children.

I understand that the purpose of this research project is to gain insight and information regarding the experiences of adoption/permanency planning social workers in BC, particularly regarding workplace stress. The goal of this study is to add to our existing knowledge regarding the experiences of social workers who facilitate transracial adoption plans in BC and to provide insight regarding how they can best be supported.

I understand that I was chosen because I am an adoption/permanency planning social worker in BC, working for either the Ministry of Children and Family Development or a Delegated Aboriginal Agency. The researcher, Susan Burke, will use an interview guide to explore my experiences facilitating transracial adoption plans as described above.

1. This consent is given on the understanding that Susan Burke will use her best efforts to protect my identity and maintain my confidentiality.

2. I understand that all citizens are required by law to report situations of a child in need of protection due to suspected neglect/or physical, sexual, or emotional abuse to the Ministry for Children and Family Development (MCFD). Any disclosure of failure to report a child in need of protection overrides any promise of confidentiality, and the information about suspected abuse must be reported by the researcher to MCFD.

3. I give my consent freely and understand that I may end the interview, refuse to answer questions, and/or withdraw from the research process at any time.

4. I understand that I am being asked to represent my own perspective and not the perspective of the agency/organization that employs me.

5. I understand and agree that the information I have given to Susan Burke in our interview will be treated in the following manner: a) I will be assigned a random code to protect my identity, this code will be stored separately on the UNBC secure shared drive and deleted at the end of the research project. b) The interview will be audio recorded and transcribed; hand-written notes will be taken during the interview.   c) During the study, this non-identifying data will be stored by Susan Burke, in a locked filing cabinet, in a locked office,

in her personal residence. Electronic files will be stored on her personal computer using a secure log-in, password protection, and anti-virus software. d) The data will be used only by Susan Burke for her thesis research, presentations, and publications regarding this research. e) Relevant statements made by me during the interviews may be used in presentations of the research however all identifying information will be removed to protect my anonymity. F) Following completion of the research project, all paper copies will be burned, audio recordings will be deleted, and electronic files will be deleted from Susan's personal computer. The code linking the data to participants will be deleted at that time. A password protected electronic copy of the data will be stored by a member of Susan's committee on his UNBC computer, which is a secure system with password protection. Five years after the study is completed, the stored electronic copy will also be deleted.

6. I understand that if I have any comments or concerns, I can contact the UNBC Office of Research at 250-960-6735 or reb@unbc.ca.

_____   _____   _____
Participant (please print)   Signature   Date Signed

_____   _____   _____
Researcher (please print)   Signature   Date signed

Appendix E: UNBC Research Ethics Board Letter of Approval

UNIVERSITY OF NORTHERN BRITISH COLUMBIA

RESEARCH ETHICS BOARD

MEMORANDUM

To: Susan Burke
CC: Glen Schmidt

From: Michael Murphy, Chair
Research Ethics Board

Date: November 5, 2014

Re: **E2014.0917.078.00**
Cognitive Dissonance and Permanency Planning: The experiences of social workers who facilitate transracial adoption plans for Aboriginal children

Thank you for submitting revisions to the Research Ethics Board (REB) regarding the above-noted proposal. Your proposal has been approved pending the receipt of a letter of approval from the Ministry of Children and Family Development for this project. Once this letter has been received, we will be pleased to issue approval for the above named study for a period of 12 months.

If you have any questions on the above, or require further clarification, please feel free to contact Rheanna Robinson in the Office of Research (reb@unbc.ca or 250-960-6735).

Sincerely,

Dr. Michael Murphy
Chair, Research Ethics Board

Appendix F: MCFD Letter of Approval

From: Thomson, Anne S MCF:EX
Sent: Thursday, November 27, 2014 9:48 AM
To: Burke, Susan P MCF:EX; 'Glen Schmidt'
Cc: Clayton, Anne M MCF:EX; Shpak, Marilyn MCF:EX; Hulten, Tracey MCF:EX
Subject: S. Burke. Cognitive Dissonance Research Project Approved

I am pleased to inform you that your research study, *Cognitive Dissonance and Permanency Planning: The experiences of social workers who facilitate transracial adoption plans for Aboriginal children,* has met all three requirements for our Ministry's research approval process:

1. You provided a copy of UNBC's research ethics approval, dated November 5, 2014.
2. Ministry sponsorship has been confirmed by Anne Clayton.
3. Your research study has been approved by our Ministry's privacy review as of November 26, 2014.

You may proceed with your research study as proposed, and connect with your Ministry sponsor with updates and reports as required. Our Branch would also appreciate a copy of the final report so the we can include it in our Research Inventory.

I wish you all the best in your research study and look forward to the findings.

Kind regards,
Anne Thomson

Anne Thomson | Applied Practice Research and Learning | Policy and Provincial Services | Ministry of

Children and Family Development | 3rd Floor, 765 Broughton St. Victoria BC | Ph: 250 356-7889

Appendix G: Themes and sub-themes

Question 1: Do Social Workers Experience Cognitive Dissonance and, if so, in What Ways?

Themes	Sub-Themes
Competing needs	• *Permanency versus connection* • *Safety versus connection* • *Attachment versus connection* • *Permanency versus foster care/aging out* • *Permanency versus community health* • *"Best interests" and competing needs*
Personal values versus organizational systems	• *Time to navigate organizational processes* • *Time to build relationship* • *Organizational politics* • *Organizational rules* • *Need for structure* • *Organizations that support Indigenous knowledge*
Cultural connection and identity	• *Identity* • *Cultural plans versus lived experience* • *Self-identification*
Personal roles	• *Being a social worker in a flawed system* • *Personal role in colonization* • *Being white*

Question 2: How Does Cognitive Dissonance Impact Them?

Themes	Sub-Themes
Physical	• *Weight gain* • *Loss of sleep* • *Headaches* • *Development of related medical issues* • *Use of (self) medication*
Mental	• *Worrying*

	• *Fantasizing about job change*
	• *Developing a negative outlook*
Emotional	• *Experiencing sadness*
	• *Crying*
	• *Disassociating*
	• *Hardening*
	• *Isolating/feeling isolated*
	• *Becoming more open and accepting*
Spiritual	• *Questioning yourself and your work*
	• *Becoming changed by the work*
	• *Connecting to culture*

Question 3: What do they do to reconcile it?

Themes	Sub-Themes
Changing the behaviour	• *Changing jobs*
	• *Engaging in acts of resistance*
Changing one of the dissonant cognitions	• *"Children can experience cultural connection in non-Aboriginal adoptive homes"*
	• *"Children can experience stability in foster care"*
Adding a new cognition	• *Seeing positive outcomes*
	• *Focusing on others' roles*
	• *Philosophizing about meaning, intent, and choice*
	○ *"I am doing my best"*
	○ *"I will be able to answer for my actions"*
	○ *"My plan is better than the alternative"*
	○ *"I can bring about change from within"*
	○ *"I am more capable than others"*