

## Reconciling Inuit Elders' Long-Term Care Needs

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This article examines the implications of Canada's Inuit aging policy, its impact on Canadian Inuit society, and that society's chronic need for improved access to health care services and products. Generally, the world is aging, as a result of a decline in both birth and death rates — i.e., low birth rates and increased longevity. Other contributing factors include improved technology, health care, and education levels. In contrast, the health needs of Inuit elders are magnified by such determinants as poverty, poor and crowded housing, racism, language barriers, and cultural differences. Many are in poor physical and mental health due to the disruption of their way of life caused by colonization, particularly the intergenerational effects and trauma of the residential school experience (Health Council of Canada [HCC], 2013, p. 9). And, they prefer to live in their home communities or other Inuit Hamlets, where they can be connected to their homeland, family, and culture. The result is that Inuit elders with complex health needs live in remote, small, isolated Arctic communities, where health facilities, health services, and long-term care for seniors are limited or non-existent, and logistically more complex and expensive to provide.

Inuit elders with the most basic surgery needs, or requiring palliative and hospice care, need to travel to distant southern urban centres thousands of kilometres from their homes, with separation from their family and disruption to their lives, and at a great cost to the government. Chronic poor health among Inuit elders is further exacerbated by poverty, the accompanying lack of means to acquire good dietary and health care products, lack of knowledge of them, and very limited access to health care products and services in their remote Inuit Hamlets. These Inuit communities essentially only have fly-in access during the majority of the calendar year, with typically only one or two annual ice-free cargo ship sea-lifts into the community, which must be planned and ordered months in advance, and are considered lifelines for these remote Arctic communities (Worden, 2014).

Sadly, given their location and climate, Inuit communities do not have the same level of care available as the rest of Canada. As a result, cumulatively over a lifetime the health con-

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ditions of Inuit elders can be severe, increasing the amount of care they need. And, disjunctively, Inuit seniors must leave their communities and live out their lives in distant institutions not culturally sensitive or safe, often thousands of miles or more from their communities and families. “The very small, isolated, and northern communities where Inuit live create a unique set of circumstances and health care challenges that affect Inuit [elders’] ability to remain in their homes” (HCC, 2013, p. 5). This issue is more significant given the fact that “[o]verall Inuit elders have poorer health than non-Inuit elders, with higher rates of chronic diseases and other conditions” (HCC, 2013, p. 7). As the number of older Inuit continues to grow, researchers predict there will be greater challenges in providing health care services. “Although age 65 is typically considered the start of senior years, some organizations and health care providers offer seniors services to Inuit people age 55 and older, largely because statistics show an earlier onset of chronic conditions and a lower life expectancy compared to other Canadians” (HCC, 2013, p. 7). Traditional cultural foods, such as wild meat, fish, and berries, are very important to the diet of seniors. Inuit communities have moved from a diet comprised largely of nutrient-dense wild foods to predominantly western food, which likely contributes to a higher incidence of disease. Many Inuit elders cannot afford to buy healthy foods (the hyper-expensive North) and struggle just to have food to eat. This makes it difficult to maintain the nutrition needed to manage chronic conditions. Also, eating less expensive processed foods, high on fat and sugar, leads to obesity (HCC, 2013, p. 8).

There is a severe shortage of housing in the North. What is available is often in poor condition, and Inuit elders may live in overcrowded conditions,<sup>1</sup> which creates stress in the family and, coupled with poor nutrition, puts Inuit at higher risk for disease (National Collaborating Center for Aboriginal Health, 2017, p. 14). Inuit elders are also subject to elder abuse, defined as financial, emotional, and physical neglect — e.g., seniors who receive Old Age Security may be the only family member with income (Beatty, 2011). Sharing is a core value in Inuit culture. Inuit elders share what they have (housing, food, money) with family members, even if unable to care for their own needs. Inuit elders are also victims of the effects of colonization and residential schools. It is described as a form of post-traumatic stress disorder for whole communities and cultures, which left many Inuit seniors socially isolated (HCC, 2013, p. 8). Families are less able to care for elders because they have their

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<sup>1</sup> National Collaborating Centre for Aboriginal Health, *Housing as a social determinant for First Nations, Inuit and Métis*,

According to the most recent data, “nearly 4 in 10 (39%) Inuit living in Inuit Nunangat lived in crowded homes, about 10 times the proportion of non-Indigenous people (4%) nationally.” (Statistics Canada, 2015a, p. 14).<sup>2</sup> One third of all Inuit households in northern regions are in need of major repairs, such as plumbing and electricity, compared to the national rate of 7%, and one third are in core housing need compared to 12.5% of Canadian households (CMHC, 2015). Much of the housing for Inuit in the northern regions is social housing. In 2000, social housing accounted for 80% of units in Nunavik; while in Nunavut, as of 2006 almost 54% of Nunanavummiut lived in Public Housing Program units and only 7% of Nunavut’s dwellings were privately owned (Knotsch & Kinnon, 2011). In 2014, the Inuit Tapiriit Kanatami (ITK) estimated that 15% of Nunavut’s population was on a waiting list for public housing, and approximately 3300 houses were currently needed to meet the housing shortage (Knotsch & Kinnon, 2011). As a result of the housing crisis, approximately “one-fifth of Inuit homes reported providing shelter to the homeless” (Minich et al., 2011, p. 526). In the Inuvialuit region, 34% of households live in public housing, however, in some Inuit communities, more than half of households live in social housing (Inuvialuit Regional Corporation, 2016).

own challenges, including mental health issues (Kral, 2012), addictions, poverty, and family violence<sup>2</sup> (family members whose own childhoods were dysfunctional are often reluctant to care for their parents). Literacy and language is a major issue (Skura, 2016), as Inuit elders often do not understand their health conditions (Wiebe et al., 2007, p. 6).

Inuit colonization and residential school experiences, along with continuing experience of racism, have created a significant mistrust of mainstream institutions, including the health care system. Too many Inuit seniors need to travel for care that could be offered in their communities, which are rural, remote, in the Arctic, with limited access to medical technology, equipment, supplies, and medication (Sponagle, 2017). Medical travel is physically, emotionally, and financially challenging for Inuit seniors, and hospitals have often sent frail elder Inuit patients home to their communities without checking to see if there are appropriate support services or home accommodations in place. Frail Inuit elders in need of extended permanent care do not have sufficient facilities in their communities and need to be moved to distant southern Canadian cities, away from their family, culture, and land. The solution, obviously, is for Federal policy makers to recognize the double whammy Inuit residential school survivors, who are now seniors, face in the final stage of their lives. Once again they will likely be pulled from their families and sent to southern Canada and housed in facilities where the language, food, and people are strange. This is traumatic for Inuit elders, who seek peace and dignity in their final years.<sup>3</sup> And in response, government must meet the chronic need for Inuit seniors services by investing in facilities (Dusen, 2016), programs, and services to be managed by the Inuit in their own communities, for their elders and to help preserve their culture rather than taking away their seniors, who are the backbone and the link to past Inuit traditions and language (Kral, 2012), from the family and needlessly moving them thousands of miles away from their community,<sup>4</sup> where they will be in isolation and seldom seen by their loved ones.

Indigenous peoples in North America have long experienced lower health status when compared with the rest of the population. Lower life expectancy and the disproportionate disease burden exist because of inadequate education, disproportionate poverty, discrimination in the delivery of health services, and cultural differences. These are broad quality of life issues rooted in economic adversity and poor social conditions (United Nations, Economic and Social Affairs, 2016, see Conclusion).

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<sup>2</sup> “If only we could confidently speak about this legacy of colonialism in the past tense. For example, the latest statistics show that the percentage of inmates in Canadian prisons that are Aboriginal has reached a record high of over 25%. Correctional Investigator of Canada, Howard Sapers attributed the increasing numbers to poverty, colonialism and the effects of the residential school system as reasons why alcoholism and other problems bring so many Aboriginal people in conflict with the justice system.” (Hoehn, 2016, p. 112)

<sup>3</sup> “Inuit interpreters are key players in end-of-life (EOL) care for Nunavik patients and families. This emotionally intensive work requires expertise in French, English and Inuit dialects to negotiate linguistic and cultural challenges. Cultural differences among medical institutions and Inuit communities can lead to value conflicts and moral dilemmas as interpreters navigate how best to transmit messages of care at EOL (End of Life).” (Shawn et al., 2017)

<sup>4</sup> The Inuit prior to colonization and forced settlement into Hamlets from their nomadic lifestyle “managed to maintain social order without the existence of a formal system of legal rules. The moral and social principles developed by the elders interviewed in the book were firmly rooted in a cosmological framework, which in many respects still represented the worldview of the Inummariit before they settled in the contemporary communities” (Aupilaarjuk et al., 2017, p. x).

Historically, after the British conquest of North America, 1763, the British Government began a process of entrenching control over its domain, and after the American War of Independence rapidly began the process of settling its colonial realm and enabling colonial governance within its remaining North American territory (now Canada, with the exception of two small islands, St. Pierre and Miquelon in the midst of the mouth of the Gulf of St. Lawrence, which remain with France, per the Treaty of Paris, 1763). Initially, the British directed colonial government approach with respect to handling both the Aboriginals and the pre-existing French Acadian settlers, who had been adversaries and loyal to the French, was assimilation; and in the case of the latter, it undertook a mass expulsion.<sup>5</sup>

Colonial governments to this day, entrenched in their own professed sovereignty, still “struggle with how to accommodate properly the needs and claims [rights] of native/indigenous peoples within their jurisdictions whose presence long predates European conquest and occupation” (Ronald Kakungulu, 2009, p. 18 at Abstract).

For over a century, the central goals of Canada’s Aboriginal policy were to eliminate Aboriginal governments; ignore Aboriginal rights; terminate the Treaties; and, through a process of assimilation, cause Aboriginal peoples to cease to exist as distinct legal, social, cultural, religious, and racial entities in Canada. The establishment and operation of residential schools were a central element of this policy, which can best be described as “cultural genocide” (Hoehn, 2016, 112).

In 1982 Canada repatriated its constitution from Great Britain, and the new constitution (which replaced the 1867 *British North America Act* that created Canada) included a *Charter of Rights and Freedoms*. Section 35 of the *Constitution Act, 1982* provides constitutional protection to the Indigenous and treaty rights of Indigenous peoples in Canada.<sup>6</sup>

It is important to understand that Section 35 recognizes Aboriginal rights, but did not create them — Aboriginal rights have existed before Section 35.

Section 35 of the *Constitution Act* states:

- 35.(1) The existing are hereby recognized and affirmed.
- (2) In this Act, “aboriginal peoples of Canada” includes the Indian, Inuit and Métis peoples of Canada.
- (3) For greater certainty, in subsection (1) “treaty rights” includes rights that now exist by way of land claims agreements or may be so acquired.

<sup>5</sup> University of Maine, Canadian–American Center (2005), “Acadians were shipped to many points around the Atlantic. Large numbers were deported to the continental colonies, others to France. Some managed to escape to New France (Quebec). A handful arrived in the Upper Saint John Valley. Many moved several times; a great number left the American colonies at the end of the war and returned to Nova Scotia; many of those in France moved to the French Caribbean or to Louisiana, where they formed the basis of the Cajun population.”

<sup>6</sup> The section, while within the Constitution of Canada, falls outside the Canadian *Charter of Rights and Freedoms*. Section 35 of *The Constitution Act, 1982* recognizes and affirms existing Aboriginal rights but does not define them. “What Aboriginal rights include has been the topic of much debate and discussion, and they have been defined over time through Supreme Court cases such as *R. v. Calder* and *R. v. Sparrow*. Aboriginal rights have been interpreted to include a range of cultural, social, political, and economic rights including the right to land, as well as to fish, to hunt, to practice one’s own culture, and to establish treaties.” (First Nations & Indigenous Studies, University of British Columbia, *Indigenous Foundations* website, online: “Constitution Act, 1982 Section 35”, [https://indigenousfoundations.arts.ubc.ca/constitution\\_act\\_1982\\_section\\_35/](https://indigenousfoundations.arts.ubc.ca/constitution_act_1982_section_35/) [*Indigenous Foundations*].)

(4) Notwithstanding any other provision of this Act, the aboriginal and treaty rights referred to in subsection (1) are guaranteed equally to male and female persons.”<sup>7</sup>

Furthermore, as a complement to section 35 of the Canadian Constitution in protecting Aboriginal rights, section 25 of the *Charter of Rights and Freedoms* broadens these rights:

“other rights or freedoms that pertain to the aboriginal peoples of Canada” indicates that the rights included in section 25 are broader than the ‘aboriginal rights’ and ‘treaty rights’ recognized and affirmed by section 35 of the *Constitution Act, 1982*: “This latter phrase indicates that the rights included in section 25 are broader than those in section 35, and may include statutory rights. ...” (Canada, n.d.)

In 1991 Canada’s Royal Commission on Aboriginal Peoples (RCAP) was established by Order in Council, and it submitted in October 1996 the *Report of the Royal Commission on Aboriginal Peoples*. Its mandate was “to investigate and propose solutions to the challenges affecting the relationship between Aboriginal peoples (First Nations, Inuit, Métis), the Canadian government and Canadian society as a whole” (Library and Archives Canada, n.d.). In the report recommendations were made “affecting virtually every aspect of Aboriginal people’s lives. We have sought to grapple with entrenched economic and social problems in Aboriginal communities while also seeking to transform the relationship between Aboriginal nations and Canadian governments” (The Truth and Reconciliation Commission of Canada [TRCC], 2015). As a partial result of the recommendations, subsequently a Truth and Reconciliation Commission of Canada, 2015, was formed, and its 94 calls to action have become an ambitious blueprint for reconciliation between Aboriginal and non-Aboriginal Canadians (TRCC, 2015):

If only we could confidently speak about this legacy of colonialism in the past tense. For example, the latest statistics show that the percentage of inmates in Canadian prisons that are Aboriginal has reached a record high of over 25%. Correctional Investigator of Canada, Howard Sapers attributed the increasing numbers to poverty, colonialism and the effects of the residential school system as reasons why alcoholism and other problems bring so many Aboriginal people in conflict with the justice system. Another example of colonialism continuing to operate in Canada is the doctrine of discovery, which is a fundamental part of the Canadian law of Aboriginal title. Faced with the daunting scale of the task of reconciliation, it was appropriate for the TRC to recommend changing many laws, norms and practices of Canadian society. The TRC defined reconciliation as “an ongoing process of establishing and maintaining respectful relationships.”<sup>8</sup>

Recognizing the plight of the world’s Indigenous people, the United Nations, after lengthy consultations and review, in September 2007 announced that “The Declaration on the Rights of Indigenous Peoples (the Declaration) affirms the minimum standards for the

<sup>7</sup> “Aboriginal rights are collective rights which flow from Aboriginal peoples’ continued use and occupation of certain areas. They are inherent rights which Aboriginal peoples have practiced and enjoyed since before European contact.” (*Indigenous Foundations*, online: “Aboriginal Rights”, [https://indigenousfoundations.arts.ubc.ca/aboriginal\\_rights/](https://indigenousfoundations.arts.ubc.ca/aboriginal_rights/))

<sup>8</sup> “This is a multi-faceted process, and includes apologies, reparations, and actions that demonstrate a true change in society. Indigenous laws and governance systems should be revitalized, and ‘as non-Aboriginal Canadians increasingly come to understand Indigenous history within Canada, and to recognize and respect Indigenous approaches to establishing and maintaining respectful relationships, Canadians can work together to forge a new covenant of reconciliation.’” (Hoehn, 2016, pp. 112–113)

survival, dignity, security and well-being of Indigenous peoples worldwide and enshrines Indigenous peoples' right to be different" (Aboriginal and Torres Strait Islander Social Justice, 2007). Yet, the four nations with the largest Indigenous populations (the United States, Canada, New Zealand, and Australia)<sup>9</sup> initially voted against the United Nations Declaration on the Rights of Indigenous Peoples on September 13, 2007, while 144 nations approved the declaration.<sup>10</sup> These four nations subsequently support the declaration.

The Declaration addresses both individual and collective rights, cultural rights and identity, rights to education, health, employment, language and others. It outlaws discrimination against indigenous peoples and promotes their full and effective participation in all matters that concern them. It also ensures their right to remain distinct and to pursue their own visions of economic, social and cultural development. The Declaration explicitly encourages harmonious and cooperative relations between States and Indigenous Peoples. (United Nations, 2007)

This brief summary cannot do justice to the body of Canada's domestic common law, statutes, traditional Aboriginal laws, and the applications of the United Nations conventions applicable to Indigenous people. The purpose has been to awaken the reader to the prevailing crisis level social, economic, and health issues facing Canada's Indigenous population as well as reminding them the looming ecological challenge of global warming, with its infringement on nature and the traditional Indigenous connection with the land, sea, and animals, as a way of life.

It would seem clear from international laws with respect to the rights of Indigenous people and per Canada's own Aboriginal Commission and Truth and Reconciliation reports that the government of Canada recognizes its obligation to provide its Indigenous people with the opportunities and quality of life the rest of the citizens of the nation enjoy. However, demographic data shows that Canada is failing in this regard. Nevertheless, there is a fiduciary obligation<sup>11</sup> to remedy and reconcile all the grievous social, economic, and health issues that have been described above and faced by the Indigenous population, particularly the Inuit and their vast Arctic environ. Foremost of all, the Inuit elders must not be overlooked nor dishonoured, for they are a people who have been taken by the colonial government from their traditional fluid life of living the seasons of the year and off the land where nature would provide best for them. Instead, they were hauled into cramped, congested, and pauper like dwellings in 25 distant communities that were accessible only by air or by sea in short summer seasons when the sea-ice has cleared and ruled by a southern imposed legal system and foreign dominated English language. Now in their golden years, when their life's wisdom is most cherished, and when societally their families and communities are innately

<sup>9</sup> "These four states represent almost half of the world's indigenous peoples" (Kakungulu, 2009, Abstract).

<sup>10</sup> "All these States share one thing in common; they have a history of using the now discredited doctrines of discovery and terra nullis to grab indigenous people's land." (Kakungulu, 2009, p. 6)

<sup>11</sup> Hoehn (2016, p. 121), "The Crown's fiduciary interest, as currently understood, reflects the hierarchical relationship between the Crown and Aboriginal peoples that is at the heart of the doctrine of Aboriginal title. This fiduciary interest was first articulated by the Supreme Court in *Guerin*. The Crown had breached its fiduciary obligation to the Musqueam Indian Band when it leased surrendered reserve land to a third party on terms less favourable to the Band than the terms approved by the Band upon surrender of the lands to the Crown. Dickson stated that the fiduciary relationship had its roots in the concept of Aboriginal title, 'but also depends on the additional proposition that the Indian interest in the land is inalienable except upon surrender to the Crown.' He said the Crown first "took this responsibility upon itself" in the Royal Proclamation of 1763 and that it was still recognized in the surrender provisions of the *Indian Act*." See also, *Guerin v. The Queen*, [1984] 2 SCR 335.

challenged, the same elders who either had children taken from them and sent to harsh distant residential schools or were themselves sent now, ironically, face the same jeopardy in their final moments — of having to be transported thousands of miles from their family, home, and land to residential elder care facilities in the south. These facilities are staffed predominantly by non-Inuit, who do not speak Inuit, and the food is a non-traditional diet that the elders are not accustomed to. This colonial legacy is, in my view, unacceptable and a breach of Canada's obligations to the Indigenous people of our land and their elders.

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