

Representations of Aboriginal Health in the Media

Chapter 1: Introduction

Through the current study, I explored Canadian media representations of Aboriginal health issues, specifically I addressed the following questions: *What Aboriginal health issues are being discussed in the media? How are Aboriginal health issues being discussed in the media? And, does the media propagate power imbalances between Aboriginal and non-Aboriginal Canadians?* Previous researchers studying the content of media publications have found that minority and marginalized groups are underrepresented in the media. For instance, Miller (1997) suggested that minority groups in Canada were under-represented, and that media articles regarding minority groups often carried a negative, rather than positive tone. This position has also been supported by Harding (2006), who further proposed a theme of negative, prejudicial framing in print media. Miller's (1997) research helps to establish a pattern of media representation across all minority groups in Canada, but does not provide specific information on any particular minority or marginalized group, and Harding (2006) provides support for prejudicial framing specific to Aboriginal Canadians in the media. While there are many domains of great interest and importance for Aboriginal Canadians (for example housing, education, treaty rights and employment) this research examined media representations of Aboriginal health issues. There are several reasons for this focus, but particularly the lack of recent research regarding Aboriginal health and the media, and the need to bring attention to the degree to which Aboriginal Canadians experience negative health outcomes when compared to their non-Aboriginal Canadian counter-parts. As will be seen throughout this chapter, evidence has indicated that

Aboriginal Canadians are represented in the media using negative prejudicial framing (Clark, 2014; Corrigan-Brown & Wilkes, 2012; Gilchrist, 2010; Harding, 2005, 2006, 2010; Henry & Tator, 2009; Jiwani & Young, 2006; Retzliff, 2005, 2006; Sloan-Morgan & Castleden, 2014; Strega et al., 2014), thus the present research sought to explore whether similar themes would emerge when examining media representations of Aboriginal health. Health, for the purpose of this investigation, was defined as the lack of ill-health (Sartorius, 2006), or in the case of much of this discussion, the increasing number of Aboriginal Canadians who report mental or physical ill-health. Thus, as will be discussed in throughout the duration of this paper, depictions of health in the media refer to discussions regarding the discrepancies in the reported prevalence of ill-health between Aboriginal and non-Aboriginal Canadians. The term Aboriginal, according to Indigenous and Northern Affairs Canada (2012), is defined as a means to describe Canadians who resided in Canada prior to European settlers. The term *Aboriginal* Canadian was chosen for the present study owing to its broad definition, which encompasses all people who lived on Canadian soil prior to the European settlers, and who have experienced the marginalizing results of colonization. In some cases throughout the present study the term First Nations was used to describe Aboriginal Canadians, which was done in order to reflect the terms used throughout the research that was cited.

Background Media Studies Frameworks

Van Dijk (1995) suggested that media sources are an effective means of communicating messages from those in positions of authority in order to shape public perception and beliefs. Using Van Dijk's suggestion, I have proposed that the language

and content found within mainstream print media aids in shaping the degree of knowledge and level of understanding held by Canadians on topics important to the quality of life on Aboriginal reservations, and including my topic of interest, health experiences and beliefs. Further, the language found within print media may limit the attention paid to Aboriginal communities regarding issues of health and basic living conditions.

Milkie's (1999) media influence theory suggests that media can be used as a pipeline to relay messages to the wider population for the purpose of changing or shaping popular opinion. According to Milkie, the media positions opinions as popular, thus creating the illusion that they are more generally accepted beliefs than is actually the case (Milkie, 1999; Park, 2005). For example, Walker and Rubenson (2013) suggested that the media was responsible for shaping literacy as a national issue in Canada through coverage in popular media. The media was able to spark literacy initiatives throughout numerous communities by suggesting that many Canadians valued literacy. Walker and Rubenson ultimately suggest that the media can be used as a vessel through which government agendas can be passed from powerful figureheads to the general population. Similarly, Hartley, Wright, and Hunt (2014) used Milkie's media influence theory to suggest that risky sexual behaviour and increasing alcohol consumption by adolescents was, in part, owing to media publications. According to Hartley and colleagues, the media suggested that adolescents were expected to engage in risky behaviours, normalizing sex and substance use for adolescents. By suggesting that risky sexual behaviour and alcohol consumption were common among adolescent groups, the media constructed the illusion that these behaviours were typical and generally accepted. Using

the inferences made by the researchers cited above, I argued that messages delivered to the public via print media may impact reader-opinion, thus propagating stereotypical discourses, and power imbalances (as discussed in previous media studies examining Aboriginal issues). To this point, results from the present study may be an indicator of potentially harmful government agendas, as suggested by Walker and Rubenson (2013), however in this case, concerning the marginalization of Aboriginal Canadians.

While there is not a considerable amount of research regarding Aboriginal health and media, Clarke, Friedman, and Hoffman-Goetz (2005) and Hoffman-Goetz, Friedman, and Clarke (2005) studied media and language use with regards to HIV/AIDS in Aboriginal communities. Overall findings from the studies indicated that Aboriginal Canadians were portrayed negatively in the media and that the media depicted Aboriginal Canadians with HIV/AIDS using stereotypical discourses of inferiority, violence and an inability to make positive life choices. In Australia, researchers concluded that policy and political motivations were at the forefront of media discourse with regards to Aboriginal health, rather than the health issues that are of concern to the Aboriginal population (McCallum, 2013). Other health topics covered in recent Canadian academic research included midwifery in Aboriginal communities across Canada (Kreiner, 2009; Olson & Couchie, 2013; Skye, 2010; Van Wagner, Epoo, Nastapoka, & Harney, 2007), and the lack of care for aging populations on Northern First Nations reserves (Prince & Kelley, 2010). In 2010, de Leeuw, Greenwood, and Cameron suggested that stereotypical discourses of addiction, poor mental health and mismanagement are perpetuated through government narratives and reflected in policy writing.

The media studies that have been published regarding Aboriginal Canadians primarily utilized newspapers, both electronic and print copy, as a means of study (Gilcrisp, 2010; Harding, 2005, 2010; Henry & Tator, 2009; Jiwani & Young, 2006; Namaste, 1999; Retzlaff, 2005, 2006; Sloan-Morgan & Castleden, 2014; Strega et al., 2014; Wilkes, Corrigan-Brown, & Myers, 2010). However, television coverage (Clark, 2014) and talk radio (Krebs, 2011) have also been previously researched. Corrigan-Brown, and Wilkes (2012) studied images found in print media to determine the common messages delivered to the public regarding Aboriginal Canadians.

A number of researchers have found common themes throughout these media studies including stereotypical discourses, an overall tone of *us versus them*, Aboriginal Peoples as criminals, Aboriginal Peoples as problems, Aboriginal Peoples and increased levels of violence, substance abuse, and inability to manage, when compared to non-Aboriginal Canadians (Clark, 2014; Corrigan-Brown and Wilkes, 2012; Gilcrisp, 2010; Harding, 2005, 2010; Henry & Tator, 2009; Jiwani & Young, 2006; Krebs, 2011; Namaste, 1999; Retzlaff, 2005, 2006; Sloan-Morgan & Castleden, 2014; Strega et al., 2014; Wilkes et al., 2010). All of these discourses communicate a general negative framing and occasionally include politically motivated messages with a view to further reinforce power relations that support euro-centric hegemonic values (Clark, 2014; Corrigan-Brown and Wilkes, 2012; Gilcrisp, 2010; Harding, 2005, 2010; Henry & Tator, 2009; Jiwani & Young, 2006; Krebs, 2011; Namaste, 1999; Retzlaff, 2005, 2006; Sloan-Morgan & Castleden, 2014; Strega et al., 2014; Wilkes et al., 2010). Topics covered throughout research on media representations included collective action (Corrigan-Brown & Wilkes, 2012; Wilkes et al., 2010), missing and murdered women (Gilchrist, 2010;

Jiwani & Young, 2006; Strega et al., 2014), child welfare (Harding, 2010), racism (Henry & Tator, 2009), criminality (Namaste, 1999), Treaty Rights (Sloan-Morgan & Castleden, 2014) and general media representations of Aboriginal Canadians (Clark, 2014; Harding, 2005; Krebs, 2011; Retzlaff, 2005, 2006). The research articles cited above demonstrate a consistent pattern of themes present throughout media representations of Aboriginal Canadians yet Aboriginal health has not been a popular point of study in media research. The increasing number of Aboriginal Canadians who report ill-health, as compared to non-Aboriginal Canadians, provides a rationale for increasing the open discourse on the topic. In order to begin to balance the scale between instances of ill-health, media representations must be examined to better understand how knowledge is being passed from media outlets to readers. Ultimately, the present study seeks to examine to what degree Aboriginal health is represented in the media, and examine the language through which it is discussed.

Harding (2006) reported an overall pattern of prejudicial framing within print media, as a major finding of a discursive analysis of news coverage regarding four important events in Aboriginal history spanning over one hundred years. The four topics included the opening of the first residential school in 1863, the right to pre-empt land in 1866, the BC Supreme Court ruling in the Gitksan-Wet'suwet'en case in 1991, and a report on child welfare from British Columbia in 1992. Harding's analysis revealed two narrative frameworks and two linguistically nuanced characterizations that were consistent across each media representation, despite the number of years that distanced each event. The first narrative framework established a discourse wherein members of the dominant cultural group and members of Aboriginal communities were understood

through an *us versus them* relational dynamic. The second framework built on that perception and situated Aboriginal communities as a threat to the *civilized order*. Harding also identified how language use infantilized Aboriginal Peoples and portrayed them as being dominated by their emotions. Harding's (2006) study demonstrated the continued use of this prejudicial rhetoric despite, what Gilmore (2015) described as Canada as being known for its support of a diverse and multicultural society.

In 2013, the Journalists for Human Rights (JHR) published a document exploring representations of Aboriginal Canadians in the media. Researchers performed a quantitative analysis by calculating the percentage of positive, negative and neutral tones used in each article. The results were calculated, then analyzed by four experts in the field. Themes discussed in the results included problem oriented reporting, the exclusion of context in coverage, stereotypical discourse, negative framing, and the exclusion of Aboriginal groups from the national news (JHR, 2013), which completes Harding's (2006) work. While the JHR (2013) appeared to indicate that journalists in Ontario were aware of the discrepancies in representation between Aboriginal and non-Aboriginal groups, the discourse used to describe this phenomenon was blanketed with the same negative framing and euro-centric hegemonic values that were being criticized. This contradiction provides further support for the need to explore the language used by journalists with regards to marginalized others, as even with the best intentions it is clear that some authors impose euro-centric hegemonic values without intention. Euro-centric values can be thought of as a series of values that exemplify cultural practices stemming from European and other western nations. The practice of imposing values, politics and beliefs on a larger society using a euro-centric perspective may limit the degree to which

other cultures are represented. Provided the topic of the present investigation is health, the following sections will outline research on health issues as they relate to Aboriginal Canadians, and discuss Bronfenbrenner's ecological perspective as a theoretical model that can aid in better understanding the complexities and intersectionalities of health issues across many systems, including macro systemic issues such as poverty, historical trauma and discrimination.

Bronfenbrenner's Ecological Systems and Aboriginal Canadians

Bronfenbrenner's (1989, 1994) ecological system's theory provides a framework to explain social systems as they occur over time, at the cultural, community and family level, and at the individual level. Referring to Figure 1.1, each level of Bronfenbrenner's (1989) framework represents a social system, from the chronosystem (meaning, outcomes over time and across generations), to the microsystem (meaning the individual's biology and personality). Each of Bronfenbrenner's systems interacts with one another while operating simultaneously within itself. For example, research on the effects of the residential school system has shown that negative health outcomes affect the individual (the microsystem; Li et al., 2013), the families of victims (mesosystem), communities of Aboriginal Canadians (the macrosystem) and continue to effect generations of Aboriginal Canadians over time (the chronosystem) (Bombay, Matheson & Anisman, 2011; Bombay, Matheson & Anisman, 2014a). Researchers have suggested that such negative outcomes can be transmitted through generations, manifesting as increasing cases of depression and addiction, seen now in children and grandchildren of Aboriginal Peoples who attended residential schools (Bombay et al., 2011).

Bronfenbrenner's (1989, 1994) model helps to explain how colonialism and discrimination affect individual health outcomes (see Frohlich et al., 2006). Examining the individual, and the issues that lead to negative health outcomes, may help to improve issues seen in broader and more nuanced systems (Green, 2010). Further, deconstructing health outcomes by looking at each system provides a broader understanding as to why individual Aboriginal Canadians report higher rates of negative health (Frohlich et al., 2006). Macrosystemic issues such as lack of access to trusted western healthcare practices and discrimination within the healthcare system worsen health outcomes for Aboriginal Canadians. Big-Canoe and Richmond (2014) and Bombay and colleagues (2014a) have suggested that distrust and discrimination increase instances of social isolation and loss of cultural identity which may increase the likelihood of risky behaviours, illness, or perhaps avoidable mortality (as discussed in a report by Parks et al. 2015). Bronfenbrenner's explanation captures the intersectionality of the systems in order to tease apart the complexity of Aboriginal health so to understand why history plays a major part in the health outcomes of Aboriginal Canadians (see Maxwell, 2014).

One of the predominant (macrosystemic) historical tragedies in Canadian history was the implementation of residential schools (RSs), from the mid 1800s until the mid 1990s (Bombay et al., 2011, Truth and Reconciliation Board of Canada, 2015). According to the Royal Commission on Aboriginal Peoples (RCAP; 1996), RSs were built with the vision of creating a country under the European Christian value system, obliterating Aboriginal culture and heritage in Canada. The schools were designed to teach children trade skills and household chores and to remove Aboriginal culture and language (Truth and Reconciliation Board of Canada, 2015).

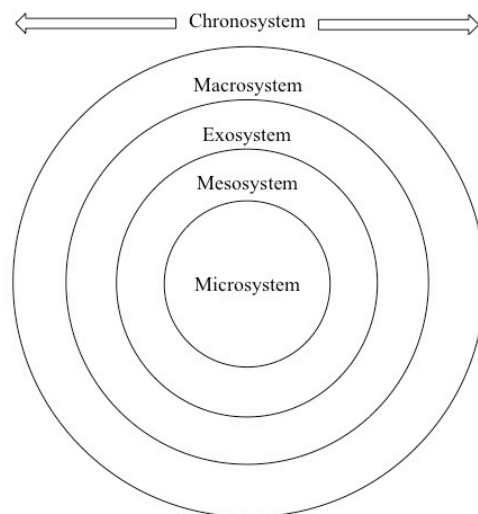


Figure 1.1. Bronfenbrenner's Ecological Systems Theory. The model demonstrates each social system. *Chronosystem*, meaning over time; *Macrosystem*, the larger cultural community; *Exosystem*, social services, industry and community; *Mesosystem*, family and close friends; *Microsystem*, the individual

While the vision for the schools encapsulated creating a manual semi-skilled, Christian workforce, the schools quickly became systems of neglect and abuse ranging from corporal punishment to starvation and both psychological and even sexual abuse (RCAP, 1996; Davey et al., 2014). RCAP (1996) and the Truth and Reconciliation Board of Canada (2015) reported that the ill treatment, forced labour of children and resulting exhaustion was met with further abuse as the children were told their heritage was at fault for their weakness. In 1981, approximately five Aboriginal girls, aged 8 to 10 years old, attempted suicide in an RS owing to conditions and treatment in the school. It was also reported that many children died of exposure upon attempting to escape from the schools, as many children were poorly equipped, wearing little clothing during harsh Canadian winters (RCAP, 1996).

In addition, RCAP (1996) reported that many of the children who attended RSs developed an inability to thrive after leaving residential school which indicates that the abuse and neglect experienced in childhood created adults who could not cope, on or off reservations, owing to unfamiliarity with both Aboriginal and non-Aboriginal cultures, feelings of confusion, and loss of identity. The inability to cope with daily living has created a generation of Aboriginal Canadians that have great difficulty raising their children, thus creating a cycling effect with regards to the abuse and neglect that was part of life within the residential school system and are ongoing issues throughout the chronosystem (as discussed in Bombay et al., 2011)

Bombay and colleagues (2011) reported that children of parents who attended residential schools had greater instances of depression than children of Aboriginal parents who did not attend RSs. The researchers reported that the symptomology may have been passed down by victims through an inability to parent with care (owing to neglect and abuse at the hands of the residential school system), through adult trauma (more likely to occur owing to negative childhood experiences) and perceptions of discrimination (owing to the distrust created by the residential school systems as well as reinforcement of this mistrust on an ongoing basis). This evidence indicates that the effects of the residential school system span across time, transforming later generations (see Bombay et al., 2011 and Bombay et al., 2014a). Li and colleagues (2013) also suggested a relationship between negative health outcomes, mental wellbeing and substance abuse in Aboriginal Canadians, and the maltreatment and neglect experienced through the residential school system. Maxwell (2014) termed the long-term and cross-generational effects of RSs as

historical trauma and posited that many negative mental and physical outcomes have ensued as a result (see also Bombay, Matheson & Anisman, 2014b).

Health and Aboriginal Canadians

One of the research questions I sought to answer during the present study was *What Aboriginal health issues are being discussed in the media?* Thus, it was important for me to educate myself with regards to the current state of health in Aboriginal communities in Canada, and explore possible reasons for the disproportionate number of Aboriginal Canadians who report ill health as compared to non-Aboriginal Canadians. This section will demonstrate that Aboriginal Canadians do, in fact, represent a disproportionate degree of Canadians experiencing ill health, when compared to non-Aboriginal Peoples. The section will also outline possible determinants that lead Aboriginal Canadians toward ill health over non-Aboriginal Canadians.

The statistics regarding health outcomes, including physical health, substance use, addiction and mental health, for Aboriginal Canadians has remained consistently higher when compared to non-Aboriginal Canadians (CAAN, 2015; Dreger, Mackenzie, & McLeod, 2013; Kasper, 2014; Li, Sun, Marsh, & Anis, 2013). Health, as described above, was defined in the present study as the presence of ill health. For Aboriginal Peoples in Canada, there appears to be higher reported cases of ill-health as compared to non-Aboriginal Canadians when assessing health physically and mentally using a bio-medical model. The rationale for defining health in these terms is that, in my opinion, that the lack of ill health is the generally accepted definition of health in Canada. For example, one would consider themselves healthy if he or she lacks symptoms of ill-health. For Aboriginal Canadians, there are differences in reported instances of ill-health compared

to non-Aboriginal Canadians. These differences include a higher reported prevalence of type 2 diabetes (Dreger et al., 2013), HIV/AIDS (CAAN, 2015), depression and suicide (Kasper, 2014), and drug and alcohol use (Li et al., 2013). One can surmise that Aboriginal health concerns discussed most often in census and government reports, and reported in academic research studies, would also be discussed widely throughout the media. The following literature review will present key information regarding the state of Aboriginal health, according to the definition above, and a brief rationale as to why these health concerns are endemic throughout the Aboriginal community. Further, the literature review is designed to serve as a guide, applicable to later sections, when discussing the results stemming from the analysis of media articles. Much of the information gathered concerning Aboriginal health was reported by Statistics Canada; however, the data gathered via Statistics Canada does not address the health of Aboriginal Canadians living on reservations. As such, the First Nations Regional Health Survey (RHS; FNIGC, 2012) was also included to highlight health concerns studied by First Nations people using methodology consistent with the ethical and cultural guidelines of First Nations. Academic literature on Aboriginal health was also included in the literature review, with results indicating that health determinants such as substandard living conditions (Webster, 2015), risky behaviours (CMAJ, 2011, 2014) and poverty (Bombay et al., 2014a; Li et al., 2013) are at the root of health outcomes in Aboriginal communities.

Overview of Disproportionate Negative Health Outcomes

The breadth and depth of problematic health concerns that are experienced by Aboriginal communities begin in childhood and continue throughout the lifespan. The projected lifespan deficit for Aboriginal Canadians is four years for women and five

years for men as compared to their non-Aboriginal counterparts (Statistics Canada, 2006b). Not only do Aboriginal Canadians experience a lower projected life expectancy, they also experience higher instances of avoidable mortality from causes such as alcohol use, type 2 diabetes and injury (Park, Tjepkema, Goedhuis, & Pennock, 2015). Park and colleagues (2015), when examining a sample gathered by comparing the Canadian census information from 1990-1991 and the Canadian Mortality database from 1991 to 2006, reported that 76% of Aboriginal Canadian men and 73% of Aboriginal Canadian women died from avoidable causes. Preventable-avoidable deaths (as opposed to treatable-avoidable deaths) were more prevalent throughout Aboriginal communities (Park et al., 2015).

Aboriginal men were significantly more likely to die from causes related to alcohol and drug use, unintentional injuries or diabetes than their non-Aboriginal counterparts, while First Nations women were more likely to die from alcohol or drugs, diabetes, infections or unintentional injuries (Parks et al., 2015). Parks and colleagues (2015) reported that prevalent risky behaviours in the Aboriginal sample led to an increase in avoidable mortality. These behaviours included alcohol use and tobacco smoking, causing increases in cardiovascular disease and lung cancer, and poor diet and inactivity causing an increase of type 2 diabetes and obesity (Park et al., 2015). The RHS (2012) reported that over 28% of injuries occurred as a result of alcohol and drug use in First Nations communities.

Many of the government reports concerning Aboriginal health cited risky behaviours as the cause for the increase in negative health outcomes for Aboriginal communities. According to the Canadian Community Health Survey (Statistics Canada,

2009), 39% of Aboriginal Canadians living in Canadian provinces (as opposed to Canadian territories), aged 20-54 years, smoked tobacco regularly. In Aboriginal Canadians who were older than 55 years, 24% and 38% of respondents in provinces and territories respectively reported daily tobacco smoking. In the RHS, the FNIGC (2012) reported that on First Nations reservations 57% of adults smoke tobacco, and 33% of First Nations youth are daily tobacco smokers. To compare, non-Aboriginal Canadians reported daily tobacco smoking at just under 20% in a 2011 report (Statistics Canada, 2012).

For Aboriginal Canadians, health concerns begin early in life, and as seen from the projected life expectancy, these concerns last throughout the lifespan. Statistics Canada (2006a) reported that 28% of Aboriginal children under the age of six have been diagnosed with a long-term, chronic health condition. Between the ages of six and fourteen, 52% of Aboriginal Canadians living off reserve, have been diagnosed with at least one health condition. For rural and urban Aboriginal Canadians living off reserve who are over the age of 15 years, 53% reported having at least one diagnosed health condition (Statistics Canada, 2006a). Specific to Ontario, the number of reported chronic illnesses rises to 60% for urban Aboriginal Canadians, and 57% for Aboriginal Canadians living in rural communities (Statistics Canada, 2006a). The FNIGC (2012) reported that over 62% of adults suffer one chronic health condition, and nearly 16% of First Nations participants reported suffering from four or more chronic conditions. The most commonly reported chronic conditions in First Nations were high blood pressure, arthritis, allergies, chronic back pain and diabetes (FNIGC, 2012).

Lix, Bruce, Sarkar, and Young (Statistics Canada, 2009) also suggested that Aboriginal Canadians show higher rates of obesity/being over-weight, type-2 diabetes, and cardiovascular disease. These chronic conditions have been attributed to higher percentages of tobacco smoking, alcohol use and physical inactivity. Lix and colleagues reported a rate of inactivity of 56% in Aboriginal Canadians living off reserve; and within that group, 50% were being obese. The results from Lix and colleagues were gathered using a self-report measure and may be an underrepresentation of the number of Aboriginal Peoples who reported being overweight or obese, thus it may be that these numbers are higher than what is reported above. The FNIGC (2012) reported that 34% of First Nations people living on reserve were overweight, an additional 34% were considered obese, and over 5% were being morbidly obese. This statistic is of great concern when compared to non-Aboriginal Canadians, whose rate of obesity is 23% (Statistics Canada, 2013). Statistics Canada (2009) has also suggested that Aboriginal women have higher reported instances of obesity than do Aboriginal men. The risks that stem from obesity include an increased risk of type 2 diabetes and cardiovascular diseases, both seen to be higher in Aboriginal groups across Canada. The rate of diabetes for Aboriginal Peoples in rural Ontario is 9%, 73% of which reported type 2 diabetes. For urban Aboriginal groups in Ontario, diabetes was reported at a rate of 8%, 61% of which were diagnosed with type 2 diabetes. Rates of type 2 diabetes may be an indication of poor food choices, a lack of education surrounding health and nutrition, or a lack of nutritious varieties of fresh food in Northern regions of Ontario. In Aboriginal communities, diabetes was reported at a rate of over 16%, and nearly 21% in adults over the age of 25 years. In non-Aboriginal communities in Ontario, the rate of diabetes has

been reported at nearly 7% (Statistics Canada, 2009). More recent research from the Public Health Agency of Canada (2011) has suggested that diabetes has been diagnosed in 17.2% of First Nations individuals living on reserves, while the current rate estimated by the Canadian Diabetes Association for all Canadians is 9.3% (Canadian Diabetes Association, 2015).

Nutrition, Diabetes and Obesity

Genuis and colleagues (2014) used Photovoice to provide Aboriginal children with a platform to speak out about food and nutrition on Aboriginal reservations. Photovoice is a tool through which photographs are used to capture narratives, thus telling a story using photographs rather than talk or text. The child who participated in the study were provided with cameras and asked to take pictures of meals, providing researchers with information regarding the kinds of food choices available to children. Nutrition and food availability have been discussed as a major issue concerning Aboriginal adults and children, who live in remote communities where food costs are high and income earning is limited. The results suggest that a significant number of meals contained highly processed packaged foods that have been correlated with higher instances of obesity and poorer overall health. Despite participants placing importance on Aboriginal traditions that contained food preparation and eating as part of rituals, there was a lack of traditional food in the photographs, indicating a loss of cultural practices around food. Conclusions stemming from the research included a need for continued education with regards to healthy food choices for parents and children. The authors also suggested that modelling healthy behaviour could decrease instances of obesity in Aboriginal children, and that poverty played a large role in food accessibility. Thus,

poverty as a systemic issue may greatly contribute to the causes of negative health outcomes on a macrosystemic level, furthering the complexities with regards to Aboriginal health (Genuis et al., 2014).

Statistics Canada and The First Nations Regional Health Survey have reported higher instances of type 2 diabetes in Aboriginal communities. Genuis and colleagues (2014) provided evidence that food choices on First Nations reservations may result in increases of obesity and type 2 diabetes. Dreger and colleagues (2015) argue that stress was a large contributor to the onset and management of type 2 diabetes within the Aboriginal population in Canada. As seen in the Statistics Canada reports, type 2 diabetes is one of the growing health concerns for Aboriginal Canadians (Lix et al., 2009). Dreger and colleagues (2015) suggested poverty, social issues and colonization as root causes of the increase in feelings of stress associated with rising rates of type 2 diabetes. The researchers' focus was on programs designed to increase positive health outcomes for Aboriginal Peoples diagnosed with diabetes, including mindfulness training and learning healthy behaviours, such as eating healthy foods and exercising. Respondents reported that participation in the program stemmed from feeling concerned for their personal health, an intrinsic motivation to achieve success, the design of the program, and the establishment of trust between participants and program directors. Building trust between practitioners and participants has been previously discussed as necessary in the facilitation of positive health outcomes for Aboriginal Canadians (Bombay et al., 2014a; Davey et al., 2014; Maxwell, 2014).

Throughout the research discussed thus far it is clear that Aboriginal Canadians consistently experience chronic health issues in greater numbers per capita as compared

to non-Aboriginal Canadians. Possible causes for the increase in negative health outcomes may be difficulty accessing health services, attitudes and beliefs toward Western medicine, educational levels, and other social determinants of health such as level of income and discrimination within the healthcare system (Lix et al., 2009; Parks et al., 2015; Statistics Canada, 2009). Frohlich, Ross, and Richmond (2006) analyzed the 2006 census data provided by Statistics Canada and further emphasized the continued impact of colonialism, oppression, discrimination, systematic racism, and unequal access to education and healthcare as causes for the disparities in health outcomes. The causes for the higher rate of negative health outcomes in Aboriginal Canadians when compared to non-Aboriginal Canadians, as outlined by Statistics Canada (2009), FNIGC (2012) and Frohlich and colleagues (2006) indicate that multiple sources of oppression may contribute to negative health outcomes for Aboriginal communities over and above risky behaviours and biological determinants. Information reported by Frohlich and colleagues (2006) indicate that colonialism and oppression, among other longstanding issues, are still affecting Aboriginal health in the present day.

Possible Causes for Health Outcomes

Big-Canoe and Richmond (2014) performed a study that asked Anishinabe youth about the impact of colonization and environmental dispossession (being relocated, usually to land in a rural or non-urban area) on health and community. The researchers utilized a community-based methodology, interviewing 19 Anishinabe youth between the ages of 18 and 27 years. The research findings indicated that the youth believed changes to the environment (both in terms of access to land for traditional food gathering and the changes wrought by resource extraction) have led to a breakdown of traditional health

practices by many youth and increasing risk to their overall health. Secondly, the participants discussed the importance of building and sustaining a strong community, although they also described a loss of Aboriginal knowledge and a need to refocus on tradition and spirituality in order to strengthen communities. The participants also reported concerns that Elders within the community were aging and that with their passing much knowledge would be lost. Owing to the lost sense of community, implications included increases in unhealthy behaviour and a decline in traditional values and spirituality (Big-Canoe & Richmond, 2014). Such findings indicate that the colonization of Aboriginals continues to be a cause for concern as it relates to issues of health. Further, the loss of cultural identity among this Aboriginal population may fuel greater distrust in Western approaches to health and healing and general distrust of non-Aboriginal Peoples and culture in general, than has been seen in the past. The FNIGC (2012) confirmed that there may be a steady decrease in traditional healing practices over time, as young adults reported the lowest use of traditional medicine across all age groups in First Nations communities. Referring back to Big-Canoe and Richmond (2014), this could be a result stemming from the need to relocate and the loss of cultural closeness felt by Aboriginal youth.

In their conclusions, Big-Canoe and Richmond (2014) underlined the need to create inclusive health practices for Aboriginal communities including spirituality and the preservation of Aboriginal knowledge, encouraging dissemination of Aboriginal healing practices to youth. The researchers suggested that colonialism, and the lack of cultural closeness may result in poor health outcomes for some Aboriginal Canadians. This finding was reinforced by Frohlich and colleagues (2006), who discussed how oppression

and discrimination are continued systemic problems that have exacerbated and widened the chasm between Aboriginal and non-Aboriginal health outcomes.

Bombay, Matheson, and Anisman (2014a) argued that Aboriginal victims of Residential Schools (RSs), who reported higher degrees of Aboriginal identity centrality (defined as identifying heavily with one's community and culture), also experienced greater perceived discrimination. According to Bombay and colleagues, those participants who placed a higher value on the importance of Aboriginal culture, when defining their self-concept, described increased feelings of threat and perceived discrimination as compared to participants who did not place so much importance on Aboriginal heritage. It was suggested that increased feelings of threat and discrimination may lead to instances of social isolation and depressive symptoms for some Aboriginal individuals. Further, Bombay and colleagues (2014a) suggested that second-generation RSs victims (the children of RSs victims) also experienced identity centrality and as a consequence increased perceived discrimination from non-Aboriginal Canadians. The researchers recommend that measures should be taken to prevent the cycle of augmented feelings of threat, perception of discrimination and the resulting increase in social isolation and depressive symptoms across second-generation RS survivors. Interventions that support trust building and inclusivity are needed to decrease these serious negative outcomes from continuing across generations of Aboriginal Canadian (Bombay et al., 2014a).

Frohlich and colleagues (2006), Big-Canoe and Richmond (2014) and Bombay and colleagues (2011, 2014a, 2014b) have suggested that larger systemic issues have propagated negative outcomes for Aboriginal Canadians, indicating that mental and

physical health issues do not begin and end with the individual. Individual outcomes exist within interlocking complex social, cultural and economic systems at the family, community and national levels (see Bronfenbrenner's Ecological Systems theory, explained above). This point was exemplified in the First Nations Regional Health Survey, as the survey combines individual, community and spiritual health throughout the questionnaire in order to best understand the overall wellness in First Nations communities.

Aboriginal Mental Health and Substance Use and HIV/AIDS

Two of the suggested outcomes of historical trauma have been the prevalence of substance use and mental illness, both of which are prevalent health issues among many Aboriginal communities (Maxwell, 2011). The Canadian Medical Association (CMAJ, 2014) has suggested that substance abuse and suicide in Northern Ontario and across all of Northern Canada is an issue that has largely been ignored by all levels of government as well as the general non-Aboriginal population. CMAJ reported that in the Sioux Lookout Health Region in Northern Ontario, 400 people have committed suicide since 1986, where approximately thirty First Nations Communities are located. Further, the CMAJ has suggested that gas-sniffing and alcohol abuse behaviours are seen across multi-generations, sometimes stretching across as many as three generations. The authors posit that owing to domestic violence and sexual abuse (also an outcome stemming from the reoccurring abuse of the residential school system), children as young as six years of age are self-medicating by sniffing gas. Many children have parents and grandparents who do not have the skills to help the youth cope with abuse within the community, thus the cycle of physical abuse and substance abuse continues. The inability to cope reflects

the feelings of loss and confusion experienced by victims of the residential school system. The National Aboriginal Health Organization (NAHO, 2011) published a report that indicated many Aboriginal Canadians use marijuana, cocaine and solvents, thereby possibly increasing the likelihood of violence and abuse in adults and children. NAHO (2011) also reported that Aboriginal women were twice as likely to participate in injection drug use and suggested that historical trauma is a likely cause for the increase. While this research outlines instances of substance abuse that are prevalent on reservations in Ontario (CMAJ, 2014; NAHO, 2011), the urban Aboriginal population also suffers from similar issues indicating that current residential isolation cannot be the only cause of negative health outcomes for Aboriginal Canadians (Tjepkema, 2002).

Currie, Wild, Schopflocher, Laing, and Veugelers (2013) performed a study that looked at the use of traditional Aboriginal beliefs and practices in treating urban Aboriginal Peoples addicted to both prescription and illegal drugs. The researchers indicated that within a 12-month period those participants who were educated on, and practiced traditional Aboriginal teachings, were more likely to have a reduced dependence on drugs as indicated by fewer relapses. Currie and colleagues explained that learning about and embracing one's heritage increased self-esteem and the participants' sense of belonging, possibly decreasing the likelihood of relapsing. These researchers' findings mirror many aspects of the research previously discussed, and further the notion that Aboriginal Peoples have been placed in a purgatory between Aboriginal culture and western culture owing to historical trauma. To remedy the loss of identity, Currie and colleagues (2013) have suggested that gains in self-esteem and resiliency are possible

through the teachings of traditional values, and that these may be powerful strategies in decreasing addictions and improving health over time.

Davey and colleagues (2014) conducted similar research with Aboriginal Peoples who were currently participating in an addictions treatment program in western Ontario. The researchers' goal was to assess the validity of the treatment program, looking specifically at the needs of Aboriginal Peoples with substance abuse dependency. The findings indicated that participants needed a treatment program that recognized the hardships that colonization and the residential school system had placed on Aboriginal communities across Canada. Participants also indicated that trust in caseworkers and facilitators was essential, and that building trusting relationships was easier if caseworkers themselves had previous experience with addiction, and were of Aboriginal descent. Additional salient themes included the need to learn coping strategies, developing mechanisms that increase self-efficacy, a willingness to succeed in a treatment program and the need for self-awareness. The researchers' findings reinforce the concepts that have been seen throughout this literature review. Aboriginal health issues cannot be remedied through individualistic bio-medical means. As discussed through Bronfenbrenner's ecological systems theory, there is a need to focus on systemic issues such as trust building and acknowledgement of the intergenerational impact of RSs. Further, there is a need to recognize that colonization and assimilation are current practices within Canadian culture.

Marsh, Coholic, Cote-Meek, and Najavits (2015) also reported that treatment seeking is particularly difficult for Aboriginal Canadians owing to a breakdown of trust in Western practices and continued social issues in Aboriginal communities. The

researchers proposed methods of treatment that would best meet the needs of Aboriginal Canadians seeking treatment for substance abuse. These programs included Aboriginal spirituality and healing practices, combining Aboriginal healing with Western treatments, and the Seeking Safety counselling program that promotes coping skills with the hope of reducing the chance of relapse in participants. Marsh and colleagues focused on the impact of historical trauma across generations resulting in the need for treatment programs that provide culturally relevant care for Aboriginal Peoples.

Maxwell (2014) argued that, in present day, Aboriginal Canadians are still required to assimilate into the dominant cultural. Through the child welfare system and other government-run programs, Aboriginal children are still being taken from their homes, which may replicate the same degree of assimilation that was seen through the residential school system (recreating the effects of historical trauma). According to Maxwell, introducing culturally relevant healing practices (for individuals and families) can reduce the effects of historical trauma, thus improving future health outcomes. Healing Centres run by Aboriginal professionals for Aboriginal communities that make use of Aboriginal healing practices and story-telling methods have shown to increase trust and improve health outcomes (Maxwell, 2011). Adapting western medical practices to include Aboriginal traditions where they have been applied has resulted in more positive health outcomes (see also Maar & Shwande, 2010).

It has been well documented that Aboriginal Canadians experience many issues with mental health, namely stress and depression, over and above the rates experienced in the non-Aboriginal population (Bowen et al. 2014; Cain et al., 2014; Synder & Wilson, 2015). Health Canada (2015) produced a report indicating that as of the year 2015, 30%

of Aboriginal Peoples in Canada have experienced depression, and that self-inflicted injuries and suicide are the most common causes of death in Aboriginal Canadians under the age of 44. Health Canada has reported that for Aboriginal men, the rate is 126 per 100,000, while for non-Aboriginal men the rate is 24 per 100,000. In women, there is a similar trend as 35 per 100,000 Aboriginal women commit suicide compared to 5 in every 100,000 non-Aboriginal women. Health Canada listed causes for the disproportionate number of suicides within the Aboriginal population as poverty, lack of education, and historical trauma (see also Maxwell, 2014). Chandler and Lalonde (1998) and Chandler and Lalonde (2003) argued that suicide in Aboriginal communities may be the result of feelings of loss of culture or inability to maintain cultural identity.

While Aboriginal Canadians experience stress, depression and rates of suicide over and above the non-Aboriginal population, subsets of the Aboriginal population also experience depression and mental illness that further reflect the broader systemic issues discussed throughout this section. Bowen and colleagues (2014) completed a review of literature that discussed perinatal and postnatal depression and mood disorders in Aboriginal women. The findings indicated that while some women demonstrated resiliency when faced with depression and pressures to abandon cultural traditions for child bearing, overall more Aboriginal women expressed having depressive symptoms and mood disorders preceding and following childbirth. The researchers argue that, in order to better understand this phenomenon, four areas required further investigation. First, to what extent are instances of cultural knowledge being implemented in mental health research; second, what effect would increases in narrative and participatory action research have on the problem; third, how would the use of traditional cultural authority

figures in healing (e.g., Elders) help the situation; further to what degree is cultural sensitivity practiced in mental health and across the birthing process? Researchers suggest that by studying these four areas, practitioners may be able to lessen the amount to which depression and other mood disorders impact Aboriginal women and their children. Further, by assessing the importance of these issues within Aboriginal communities, it may be possible to assess how tradition and culture is adopted into practice for Aboriginal women and families (understanding health through larger systems as discussed by Bronfenbrenner). Regarding the topic of health, the authors noted that there was an increased rate of depression in Aboriginal women of childbearing age regardless of their childbearing history. New mothers who experience depressive symptoms may put their children at risk or inadequately care for their child, as seen in some parents who attended residential schools (Bowen et al., 2014).

Among the list of chronic illnesses that are disproportionately represented in Aboriginal communities when compared to non-Aboriginal Canadians, instances of HIV/AIDS have also been a growing concern for Aboriginal Peoples across Canada. CAAN (2015) published a report that cited Aboriginal Canadians were almost four times more likely to be diagnosed with HIV than their non-Aboriginal counterparts. The reason for the disproportionate rate of HIV and AIDS was attributed to injection drug use, and the overrepresentation of Aboriginal Canadians in the prison system per capita, as compared to non-Aboriginal Canadians. Additional areas of concern with regards to diagnoses included lack of health education, lack of sustainable housing, homelessness, and very problematic access to health services, racism and colonialism (CAAN, 2015).

CAAN (2015) also reported that Aboriginal youth, as compared to non-Aboriginal youth, are at a greater risk for HIV and AIDS, a suggestion that was also made by Shercliffe and colleagues in 2007. Shercliffe and colleagues suggested that Aboriginal youth are at a greater risk for HIV, AIDS, sexually transmitted infections, and cervical cancer. The authors examined the likelihood of condom use in an Aboriginal sample in Regina and posited that higher levels of self-efficacy would result in increased condom use in Aboriginal youth. The results suggested that assertive communication and emotional control increase the likelihood of condom use. In addition, the authors found that within the participant group, younger Aboriginal youth were less likely to regularly use condoms as compared to older youth. Researchers suggested that younger participants may be less likely to have strong skills in assertive communication and emotional control, resulting in inconsistent or very low levels of condom use, thus increasing the likelihood of negative health outcomes. Researchers concluded that Aboriginal traditions and empowerment are integral when implementing programs designed to decrease risky sexual behaviour within this population (Shercliffe et al., 2007).

In a qualitative study, Cain and colleagues (2013) sought the personal experiences of Aboriginal People living with HIV in Canada. Seventy-two Aboriginal people with HIV/AIDS were interviewed, focusing on the likelihood of a comorbid diagnosis of depression and HIV. The findings indicated that participants who experienced depression and substance abuse may have led to, or may share a causal relationship with, a diagnosis of HIV, in part, owing to the colonization that left Aboriginal communities broken, abused and impoverished. The researchers also described the difficulties participants

faced in terms of racism, homophobia and rejection outside of and within their communities both before and after their diagnosis. As a consequence they experienced further the results of social isolation and increasing depression and substance use, making their problems all the more worse (Cain et al., 2013).

Throughout the course of the above review, several themes have been presented with regards to health concerns facing Aboriginal Canadians. These include health issues that may have resulted from poverty (Genuis, 2014), historical trauma (Marsh et al., 2015; Maxwell, 2014) and discrimination (Bombay et al., 2011; Bombay et al., 2014a; Lix et al., 2009). It is clear from the research above that health issues do not stand alone, but are embedded in a complex system that spans across time, and communities, affecting individual health and cultural stability. In addition to the social determinants of negative health outcomes for urban and rural Aboriginal Canadians, poor housing conditions have been cited as one of the causes of negative health outcomes. Webster (The Lancet, February 7, 2015) published an article outlining housing concerns on reserves in First Nations communities. The author suggested that black mould, unsanitary water, seasonal flooding and subsequent overcrowding has led to an increase in the cases of tuberculosis, respiratory illnesses and depression in many Aboriginal communities. Webster (2015) also points to the increase in suicide and chronic stress as stemming from the living conditions in many First Nations communities.

Snyder and Wilson (2015) suggested that urban Aboriginal People experience greater health issues owing to housing instability, as compared to urban non-Aboriginal people. The researchers proposed that without a stable and long term home environment, many Aboriginal Peoples experience higher rates of social isolation, stress, and decreases

in mental and physical health. Chronic moving has been linked to an inability to establish roots, or practice cultural traditions, and these have also been suggested to result in poorer health outcomes. Researchers posit that chronic displacement may also contribute to an inability to form cultural identity, compounding the results of historical trauma (Synder & Wilson, 2015).

Throughout the scholarly research, increased health risks owing to substance abuse, addiction and mental illness are reported more frequently in Aboriginal communities in Canada than in non-Aboriginal communities (NAHO, 2011). In addition to the increased prevalence of health concerns, many of the articles cited historical trauma stemming from the residential school system as the main determinant (e.g. Maxwell, 2014). Historical trauma has been compounded by social isolation, the location of communities, and limited access to quality healthcare (Cain et al., 2013). Aboriginal health outcomes continue to be affected by history, the national community, Aboriginal traditions and culture, housing and education, and generational trauma. As seen through Bronfenbrenner's (1989, 1994) ecological systems theory, the systemic issues that plague Aboriginal communities trickle down, affecting Aboriginal individuals and families. The effect on individuals and families then, conversely affects communities of Aboriginal Canadians, and the dominant cultural group through a higher dependence on the healthcare system. Owing to the disproportionate number of negative health outcomes for Aboriginal Canadians when compared to non-Aboriginal Canadians, I expected that Aboriginal health issues would be a prevalent topic throughout media publications. In order to assess the role that the media has played in conveying relevant health issues to the dominant cultural group, I employed a thematic analysis borrowing techniques from

Critical Discourse Analysis (CDA). The following chapter will provide a rationale for the methodology used throughout the research process, including theoretical perspectives.

Following the theoretical positioning, I will outline the methodology and provide background on the relevant analytical devices used throughout the research process.

Following the methodology, I will provide a detailed description of the results, followed by a thorough discussion and concluding messages.

Chapter 2: Theoretical Positioning

Prior to describing the methods used throughout the present study it is important to explore the epistemological influences, and the theoretical perspectives that have underpinned and guided the development of the research questions and the subsequent study design. The execution of a research study must be built on a foundation that is in direct relation to both the question being asked, and the pathway toward results (Crotty, 1998). Again, the research questions that were explored within the present study were: How are Aboriginal health issues represented in print media? What Aboriginal health issues are being discussed in print media? And, does print media propagate power imbalances between Aboriginal and non-Aboriginal Canadians?

When conceptualizing research questions, a researcher is tasked with developing a study using a clear methodology through which the question(s) can be answered. A good design will consider past research, and base its methodology on furthering knowledge and awareness of an important topic. The research question should be the primary guiding force used to develop a study engaging a specific methodology in order to arrive at valid results. While the research question must guide the chosen methodology, a researcher's values and experience shape both the formation of the question and the way in which the researcher is inclined to design the study (Crotty, 1998). Thus, it is less likely that a researcher will consider all methodologies prior to developing the appropriate study. Rather, the researcher will fall upon previously held beliefs and experiences in order to shape and answer a research question.

The information contained in this chapter is designed to rationalize the methodology chosen for the current research by exploring epistemology and theoretical

perspectives. The goal in unpacking the epistemological stances is to demonstrate that the methodology chosen for the current study came from careful planning and consideration. The theories that serve as the backbone for the present research study are perspectives that have shaped my thinking as a researcher, but also serve to address the research question.

Commonly held schools of thought in social science research are divided into large castings referred to as epistemological stances. Crotty (1998) described epistemology as a fundamental explanation of how one believes knowledge is acquired. Epistemology is an overarching belief system that guides the way in which methodological practices are designed. In order to discuss *what we know*, epistemology frames knowledge acquisition as an interaction between a subject (i.e. a human), and an object (anything that a subject comes in contact with). The interaction between the subject and the object is described in terms of the meaning-making that occurs between the subject and the object. The way meaning-making is interpreted is dependent on the epistemological stance to which one subscribes, or the epistemological stance being applied to research, which in most cases coincides with a researcher's values concerning knowledge acquisition. In psychological terms, meaning-making can be compared to the development of schemas, in that meaning can be thought of as categories, the creation or expansion of categories, or the cataloguing of information into pre-existing categories (Krauss, 2005). Along with the notion of epistemology, Crotty discussed ontology, which is the consideration of what one thinks to be reality. Combining these two concepts: the understanding of *how we know* (epistemology), and how we consider *what is* to be known (ontology) Crotty argued that researchers ascribe specific qualities to meaning-making.

These qualities are discussed as three overarching epistemological stances that help researchers form questions and develop methods in order to make informed suggestions regarding how the world operates.

The more commonly held epistemological stance in psychological research is objectivism. Crotty (1998) wrote that objectivists believe that objects hold a singular, pre-established meaning. Within objectivism the meaning of an object is not related to the subject, rather the meaning of an object stands alone. For example, a tree is, and always has been, a tree: a concrete piece of natural biology with roots, a trunk, branches and foliage. Across cultures, context and time, with or without the presence of a subject (a human) the tree will continue to be a tree. Thus, the meaning-making that occurs within objectivism rest solely on the object. The subject is a passive observer of an *objective truth*. In terms of ontology, objectivists believe that reality exists within the static nature of the object. The object, and its sole meaning exist for all subjects within a reality that can be observed, tested and does not change. Essentially, the objectivist believes that knowledge is acquired objectively by observing objects. The science used to explore these methods relies on the belief that there is one fixed reality. Positivism, in psychological research, stems from the scientific methodology adopted in physics and mathematics. Positivists believe that science is an objective field, where the scientist stands outside of the experiment as an unbiased observer, observes a fixed reality, and reports on these static observations. Post-positivism, a more modern approach, shares the objectivity of positivism but gleans that much can be learned from theorizing and falsification, rather than simply observing and reporting. Post-positivism bears a closer resemblance to how psychological research is performed today under the positivist

paradigm. The post-positivist notion of clearly theorizing or hypothesizing and attempting to falsify one's theory was established by Karl Popper (Crotty, 1998). Popper suggested that merely observing and reporting was not a true scientific practice as it relies on logic to make inferences. Thus, Popper argued that in order to practice scientific methodology a researcher must first theorize using a clear hypothesis, make inferences based on the theory, and finally rigorously and transparently attempt to falsify the hypothesis. In attempting to disprove a hypothesis or theory Popper argues that refutability is quashed, leaving little room for the argument that the theory may be false. This process, termed hypothetical-deductivism is readily used in psychological research under the positivist paradigm.

Crotty (1998) denotes two additional epistemologies that are seen throughout research in social science: constructionism and subjectivism. While the two epistemological stances are often referred to interchangeably, Crotty described distinctions between the two. Subjectivism describes meaning as being placed on an object by a subject, without the consideration of a previous relationship between the subject and the object. The subject derives meaning from an object out of nothingness. Deriving meaning from nothing implies that context, time and history do not play a role in the subject appointing meaning to an object. Researchers subscribing to the subjectivist epistemological stance believe that the object does not play a role or contribute to a subject's meaning-making but that the subject creates the meaning. Thus, there is a platform within subjectivism that lends itself to multiple realities, dependent on the subject's meaning-making. The ontological approach of subjectivists opposes the fixed reality of objectivism. Thinking again of the tree, a subjectivist would create a meaning

from the tree that does not rely on the presupposed definition of a tree. The subjectivist may see it as a possible home, wood for tool making or as food. The meaning-making that occurs within the subject would not consider the tree as the roots, the trunk and the leaves, although he or she may depending on the subjects meaning-making process. The tree in one instance may serve as food for the subject but in later contexts may serve as something entirely different and past experiences do not influence the new meaning-making that occurs.

Finally, Crotty (1998) described constructionism, which is the epistemological stance where there is no objective reality but multiple possible realities and multiple truths. Constructionism takes into account the interaction between the subject and the object during the meaning-making process. A subject's meaning-making process includes cultural values, context, time and history. While subjectivism describes the subject as placing meaning on an object, constructionism describes the subject as extracting meaning from the object. The constructionist would see the tree as both a tree with roots, a trunk, and leaves, but would also bring additional meanings derived from culture and experience. If the constructionist spent time climbing trees that would contribute to the meaning or, if the constructionist was looking for shelter, he or she may see the tree as both a tree and shade from the sun.

Within the constructionist view, meaning-making is described as an active process. Human beings, when making meaning, are not passive in this pursuit; rather, they are active participants in how the world is understood and interpreted (Krauss, 2005). As participants in a social world, individuals are constantly sorting through stimuli and responding dependent on previous meanings, or categories that exist.

Objectivism does not account for the subject's experiences as a contribution to meaning-making. The objectivist notion that the researcher is an unbiased observer does not account for past experiences or context. Subjectivism does not account for the object's contribution to meaning-making or the interaction between the subject and the object. Therefore, these epistemological stances could not adequately explore the relationship between a subject and a piece of popular media. It is the embedded cultural values of the subject and the language used throughout popular media (the object) that is the point of exploration for the current research. Further, it is the interaction between the media and the dominant culture that is being called into question. Constructionism upholds the notion that the relationship between the subject and the object is a complicated process of meaning-making wherein the subject's experiences, context and culture play a key role.

Epistemological stances provide a broad understanding of how knowledge is gained. According to Crotty (1998), establishing how knowledge is acquired is the first step in designing an appropriate methodology. Thus, when developing the methodology used to answer the research questions listed above, it was imperative that the epistemology fit both the goal (answering the research question), my beliefs regarding the acquisition of knowledge and the existence of multiple realities. As such, a constructionist epistemological stance was adopted. Constructionists focus on meaning within the object, previous experiences of the subject, and the space between the subject and the object where the meaning-making occurs. For this reason, the theoretical perspectives stemming from constructionism will be the focus for the duration of this chapter.

There are two theoretical perspectives under the umbrella of constructionism that have aided in building the present model. The first is social constructionism, the notion that meaning-making is dependent on our experiences within the social world and social interactions, and the critical perspective, which is specifically concerned with power relations found throughout interactions, communities and cultures (Crotty, 1998; Wood & Kroger, 2000). Prior to discussing social constructionism, I would like to first discuss theories relating to the formation of the social world and language use. The current study relies heavily on understanding culture as being embedded within the individual (and vice versa) and how language has played an essential role in the formation of our culture, cultural embeddedness, and the creation of experiences for individuals.

Theories regarding the construction of the social world posit that social systems were constructed initially through the evolution of gestures and language. Over time, gestures and language have formed normalized patterns and behaviours within communities that develop into cultural values, ideologies and beliefs (Mead, 1910/1964 version). Values and beliefs may be taken for granted by the dominant cultural group as *the way things are*. The following is an example to illustrate this point.

Familial sleeping arrangements, as discussed by Shweder (2003), serve as an example to illustrate the embeddedness of cultural values. In western culture, it is the norm for a cohabitating couple to share a bed, while offspring sleep in separate beds and most often in separate rooms. Although this may be the case in many western homes, it is not the case throughout other cultures in the world. In Japan, for instance, entire families often sleep in one bed. Children sleep with their parents from infancy through to adolescence. The western notion that a child or an infant should sleep alone is seen as

immoral or neglectful in many cultures, while in western cultures it is believed to foster autonomy and independence in children. Both sets of values carry conviction within their social world, and neither can be described as right or wrong. The ideology is engrained within each culture and is held as a given or a norm. Outside cultures that disagree with the belief may be putting children at risk. The risks of co-sleeping in western cultures have been listed as difficulties coping and adapting later in life, sudden infant death and increases in pedo- and hebephilia. Non-western cultures attribute to segregated sleeping arrangements, children feeling alone and uncared for, resulting in later life difficulties.

Shweder's (2003) example demonstrates that the way in which one sees the world is shaped by the lessons learned since infancy. Through specific behaviours, ideologies and values become the patterns that create everyday life. Behaviours and values become enmeshed in actions and thoughts thus becoming cultural norms. Mead (1910/1964 version) provided a theory for the birth of cultural norms and his explanation begins with how humans came to be social, communicative beings. Mead's theory regarding the construction of the social world describes cultural embeddedness as evolving out of a need to communicate very basic messages to one another to ensure survival. The theory suggested that gestures were the first forms of communication between human beings. Over time, initial gestures transformed into complex systems of communication that later evolved into language. Gestures and language developed owing to the needs and the geography of a community. Mead believed that without interactions with others, humans would not have fostered conscious thoughts or emotions. He believed that one's inner voice or consciousness is the result of the systems of language that have developed throughout history. Further, that conscious thought is specific to culture and the social

world. For instance, thoughts or opinions regarding co-sleeping are directly related to the ideologies of a society, as seen in Shweder (2003). In short, the development of communication is responsible for creating the social world and responsible for creating the individual situated within the social world. Mead (1910/1964 version) posited that interactions between human beings have played the essential role in learning how to nurture, care, produce, and experience emotions. The way in which humans have developed using social interaction is the initial component to the development of culture. The interactions that have been repeated over time become a part of the cultural norm. According to Mead's theory, we are social beings, conditioned through social conduct resulting in the creation of meaning through interaction using symbolic means.

The construction of consciousness and the social world is important to this discussion as it parallels the relationship between the subject and the object within (social) constructionism. The theory explains meaning-making as occurring within the space between the subject and the object, and considers context and the understanding of social norms. To further complicate the concept of interaction, communication between two subjects must rely on both parties understanding of language, gestures, culture and social norms (Wood & Kroger, 2000). Social constructionism relies on meaning derived from both the subject and the object (or additional subject) as it comes together in the space between. Ontologically, the reality considered by both subjects is deemed truthful and contributes to the meaning-making process. The space between the subject and the object, or the space where an interaction takes place (as Mead described it) is of particular importance to the current study, as it is believed to be the space where meaning-making occurs.

It has been established that inter-human communication and the development of language marked the creation of the social world (Mead, 1910/1964 version). In order to further understand the role of language within culture and the social world, the theoretical perspectives must be expanded to include the theory of social semiotics. Semiotics are signs and symbols that people use to communicate (Urban, 1981). Halliday, who originally coined the term, described it as the use of grammar, not as a rule in writing but as a way to relay meaning (Van Leeuwen, 2005). Since the development of Halliday's theory of social semiotic communication the concept has been expanded to include many varieties of signs and symbols used to communicate (Van Leeuwen, 2005).

Semiotic resources are what people draw upon in order to communicate, which may vary dependent on the motivations behind the communication. Specific words, pauses or images are chosen by a subject in order to relay a specific message or to evoke a specific meaning. Van Leeuwen (2005) discussed the range of possible meanings that a semiotic resource can convey as the semiotic potential. *Theoretical* semiotic potential is the total number of possible meanings that can be inferred from a communication (or a series of semiotics), whereas the *actual* semiotic potential considers the motivation behind the message and the meaning that is presupposed by the communicator. When a communicator draws on specific semiotic resources to relay a message, the motivation behind the message shapes the actual meaning potential, reducing the number of theoretical potentials that can be considered by the receiver. In research, all theoretical meaning potentials may be considered prior to limiting the data to possible or actual meanings within an exchange between two subjects, or a subject and an object.

In communication, semiotic resources are the tools that are drawn on in order to relay a specific message with a specific motivation. A subject uses semiotic resources throughout communication in order to create meaning. The creation of meaning by the communicator relies on the understanding of receiver. The meaning that is created by the receiver is fabricated using previously held meanings, and the semiotic resources imposed by the communicator. As participants in a social world individuals are constantly sorting through meaning and responding, dependent on previously held categories that are shaped by culture, community and context. A point of exploration for the present study is that journalists may use specific semiotic resources to evoke premeditated emotions or thoughts in readers, relying on cultural norms and language to reinforce ideologies and values held by more powerful others. Harding (2005) suggested that journalists use semiotic resources to tap into “common sense” thinking or stereotypical discourses throughout the media. By suggesting that stereotypes are common sense, journalists can covertly apply labels or ideas to groups without using explicit or offensive language.

Krauss (2005) described meaning-making as an active process, occurring through interaction. One of the mediums through which meaning-making occurs is through discourse. To place discourse within the confines of this discussion, it is what occurs within the space between two individuals that allows meaning to be shared between an individual and an *other* (the *other* is typically described as another individual, but could be a group, a piece of music, an art form, or text). Discourse can be verbal or non-verbal and its meaning is dependent on the context and time in which the discourse takes place.

Halliday (as cited in Urban, 1981)¹ described a phenomenon wherein discourse is typically constructed through thought patterns or previously held categories, creating a communication that is culturally specific. Culturally constructed meanings shape discourse in that the language that is used is dependent on the understanding and concepts embedded within a cultural landscape. Halliday furthered this notion by explaining that while discourse is culturally specific, there exists between cultures a fundamental discourse that allows meaning to be shared between groups. When considering the point wherein discourse occurs between communicators, meaning-making and social mechanisms aid in the constructions of one's ideas about the world. Specific values focussed around other cultures may include preconceived notions that are embedded within the cultural discourse and may provide a basis for prejudice and marginalization. Social constructionism, seeks to investigate the nuances that exist within various social worlds and the participation of the individual within that social world (as well as the impact to the individual).

As a theoretical perspective within constructionism, social constructionism is concerned with exploring meaning-making as it occurs in the space between the subject and the object; it is concerned with interactions (Mead, 1910/1964 version). Social constructionists believe that humans exist within a social process, whereby individuals cannot be separated from the social sphere (Burr, 2015). The nature of this relationship is cyclical in that individual thought or consciousness cannot be separated from the social world, the social world constructs the ideals and values that exist within the individual, but cannot exist without the individual. Essentially, we simultaneously build, and are

¹ Halliday's original work unavailable

products of the world around us. In contrast to positivism, social constructionism does not consider one objective reality, but multiple realities existing within each individual as he or she experiences the world (Parker, 1998). Further, social constructionism does not subscribe to reductionist views that events and experiences can be isolated from the social world, as the individual is a caveat for the existence of social norms (Von Glasfeld, 2001). Without an individual acting upon norms learned from infancy, the social world would cease to exist. Social constructionists believe that meaning-making occurs within the context of time, history and language (Willig, 2008). Like Mead, social constructionists value the importance of language in the propagation of cultural norms, and view the social world as a product of many actions rather than a reflection (Willig, 2008). Gergen (2001) suggested that the social commentary stemming from social constructionism appears as a critique of the social world; thus social constructionism and critical theory appear together in many publications (Burr, 2015, Gergen, 2001). Gergen (2001) argued that the difference is that while critical theory considers power differences as a fundamental value, social constructionism is a broader system including many aspects of meaning-making between the subject, the object and the interaction with the larger social world. Berger and Luckmann (1966) have argued that critical theory is an expansion on social constructionism, wherein critical theory broadens the theoretical perspective to include the consideration of power as a point of interest.

Like social constructionism, critical theory has emerged as a theoretical perspective embedded within constructionism. As such, critical theory shares with constructionism, the ontological belief that multiple realities exist within a social world (Crotty, 1998). As discussed, our social world has been shaped by our ability to

communicate, and our culture fabricated through a network of communication. Critical theory seeks to explore how power and inequality is propagated through patterns in discourse that have led to embedded beliefs (Crotty, 1998; Machin & Mayr, 2012). Power differences between men and women, the rich and the poor, and dominant and marginalized cultural groups are examples of the topics often explored within research using critical theory. Broadly, critical theorists ask questions that address power imbalances embedded within cultural norms (Crotty, 1998; Machin & Mayr, 2012; Wood & Kroger, 2000). Researchers strive to bring awareness to the way that cultural groups reinforce power imbalances within the social world.

According to Brewer (2001; see also Crotty, 1998 for discussion) Marxist notions regarding the power differences between the bourgeoisie and proletariat serve as an example to demonstrate the ideals of critical theory. Marx believed that it was the intent of the bourgeoisie to keep the proletariat in a powerless position. Marx posited that in order for change to occur within the social world, the proletariat needed to band together to enforce change. Without change, the bourgeoisie would remain in a position of power, limiting the lives and freedom of the proletariat. Human beings, Marx suggested, enjoy the notion that freedom of choice, and the freedom to act upon free will, are part of what differentiates us from other animals. Critical theory suggests that the values and ideals built into our culture limit the freedom of many people within a cultural group. Essentially, we enjoy the idea that we are free but the reality is that we exist within a system of rules that rob us of freedom. Marx also argued that false consciousness plays a key role in maintaining the status quo of a society. False consciousness, according to Marx, is based in following the dominant hegemonic values of a society. When dominant

hegemonic values are applied to a society in order to oppress a less powerful group, the less powerful group may adopt, as part of their identity, the opinions and beliefs of the dominant group. Thus, the less powerful group behaves and adopts the qualities put upon them by the dominant, more powerful group. Critical theorists strive to deconstruct these powerful systems and expose areas of imbalance in order to change the cultural status quo to include freedom for all individuals, groups and communities (Crotty, 1998). Challenging the status quo requires that a critical theorist tease apart commonly held beliefs in order to expose misgivings that create inequality. In doing so, the critical theorist deconstructs understood cultural norms and actively pursues avenues of change.

One of the overarching goals of the present research study was to explore the semiotic resources within media articles that propagate power imbalances between the dominant culture and Aboriginal communities. By looking at the data through a critical lens, exploring how semiotics are used to relay events in the news, and pinpointing language that limits the freedom of a cultural group, it was the intention of the present study to bring awareness to the possibility that language may be used in the media to keep the cultural status quo of inequality between the dominant cultural group and Aboriginal groups in Canada.

The epistemologies, ontological perspectives and theories presented in this section describe the backbone for the present research. The perspectives discussed above are the ideals held by the researcher and lend themselves well to the research questions. Social constructionism provides the outlook that individuals are a product of context, history and the language that has built the social world. Critical theory allows for a foundation through which to explore power differences embedded within the media. While each of

these perspectives value the notion of multiple realities, the reality that is subject to investigation in the present study is the possibility that semiotic resources are used in media to propagate the cultural status quo of inequality between the dominant culture and Aboriginal groups. Important to this investigation is the possibility that culturally embedded language used within print media is propagating the marginalization of Aboriginal groups resulting in negative health outcomes, as discussed throughout the introduction. Bringing the importance of language use to the forefront of discussions regarding the relationship between the dominant culture and Aboriginal groups provides a platform through which change and equality can occur.

In order to begin a discussion regarding changes to the cultural *status quo*, aspects of critical discourse analysis (CDA) were adopted as part of methodology for the present study. The critical component to CDA follows the values outlined in the explanation of critical theory. Discourse, as previously discussed, is a mechanism by which meaning-making occurs, as described above (Machin & Mayr, 2012). The analysis of discourse can be looked at in two ways. The first type of analysis looks at linguistics, separating it from the pragmatics of language, or meaning, while the second type of discourse analysis focuses on meaning-making or the function of discourse (Alvesson & Karreman, 2000; Urban, 1981). Throughout the present study, a thematic analysis was performed with the latter type of discourse analysis as the focus, exploring the ways in which authors or journalist shape meaning through semiotic devices. Wood and Kroger (2000) discussed three assumptions that should be considered when performing a discourse analysis. While the present student included a thematic analysis, these assumptions were considered throughout the research process (as aspects of CDA were incorporated into the

methodology). The first assumption is that discourse itself is action. This assumption means that the act of creating discourse is an event, rather than a description of an event. The second is closely related to the first, in that discourse is an event occurring in time. The occurrence of discourse as time-specific considers culture, context and past experiences as part of the active process through which meaning is made. The discourse that occurs in time is the topic or focus of study rather than a means of discovering information. The third assumption is that there is variability in meaning-making dependent on the ideals, values and culture of the communicators, and the time and context through which a discourse occurs. Variability may also be interpreted as differences in the function of language from one individual to another. Communicators use semiotics to actively relay specific, and functional messages, and the receiver uses similar devices in order to understand communications; however, there may exist variance in meaning-making during the interaction. Variability in meaning-making allows for the presence of multiple realities, as reflected in the values of constructionism (Wood & Kroger, 2000).

CDA is concerned with power, and investigates how power is exercised and propagated through communication. Fundamentally, CDA subscribes to the ideals of the critical perspective but is a practical methodology of study. While keeping in mind the assumptions for discourse analysis, Wood and Kroger (2000) described three additional components involved in CDA. When performing an analysis using CDA researchers must understand that it is macroanalytic, meaning that the process is top-down: looking at larger social systems and understanding the ways in which they are described or represented in text (see the discussion on Bronfenbrenner, 1989, 1994, regarding

intersectionalities and systems). Further, CDA seeks to understand the dynamics and construction of social and cultural systems. It seeks to explore how power relations are propagated and exercised within social systems. Lastly, CDA is concerned with power, seeking to explore how power is both upheld and eliminated through symbolic interactions including texts. This is why many examples of CDA include issues concerning politics, war and marginalized groups as seen in Machin and Mayr (2012), and why the critical perspective is essential to the present research.

The social semiotic theory of communication, described by Machin and Mayr (2012), proposes that researchers look at language as a social resource, or a facilitator for meaning-making rather than looking at the linguistics itself. Importantly, social semiotics understands that language is a contributor to the social system and that personal agency directs messages through specific motivations. Examining media articles through this lens allows researchers to explore how semiotic resources shape individual interpretation. By looking at the topics covered throughout media articles and the cultural and social rules of linguistics, researchers can explore and suggest patterns of power imbalance within the media. Techniques involved when analyzing a text using critical theory can be combined with social semiotic theory to better understand some of the smaller nuances used in language that expand or contribute to how a message is received. It is when repetition occurs within media articles that connections can be surmised and expressed as a cultural phenomenon or theme (von Humbolt, 1795, as cited in Von Glasersfeld, 2001)². To analyze the media articles for the present study, a thematic analysis was conducted, coopting four specific semiotic devices used in CDA.

² von Humbolt (1795) not written in English

Social constructionism creates a platform for researchers to engage in a discourse with the social world in order to better ascertain *how* people come to acquire knowledge (Raskin, 2002). It is with this knowledge that one can consider the social constructionist ideology that there are such concepts as “no objective truth,” but many truths stemming from various interactions (Burr, 2015; Parker, 1998). The ability to find meaning within an interaction using the social constructionist view enables a researcher to stretch beyond a positivist or reductionist view to better explore experience as it exists *between*. In other words, a researcher seeks to understand experience by exploring the space where interaction exists, and simultaneously considers personal, community and power differences. Many researchers who subscribe to critical theory explore how discourse is used to create, propagate and reinforce specific social or cultural values and ideals, and how inequalities are created and reinforced. Many critical theorists also actively pursue change in order to create equality and empower marginalized groups. Owing to the importance placed on power relations within the present study, aspects of CDA were co-opted in order to explore social inequalities that are propagated through discourse (in text) using the assumptions discussed by Wood and Kroger (2000) and Machin and Mayr (2012). Throughout this study, the thematic analysis was designed to pinpoint the motivations behind the messages being delivered to the dominant culture where Aboriginal health is concerned.

Chapter 3: Reflexivity

Valuing methodologies and perspectives outside of the mainstream has, in my experience, been met with scepticism. Crotty's (1998) response to varieties in methodology provides me with the confidence to pursue research avenues according to my values and the training that I have received thus far as a researcher. In my opinion, it does not benefit the scientific community to maintain the status quo over and above finding the best possible and most suitable way to answer a research question. As discussed in the previous section, I believe that our personal beliefs shape our interests, in turn shaping the way in which research is designed and conducted.

In writing the section on Theoretical Positioning, my aim was to show that a researcher must develop a study that can best explore answers to the research questions, rather than adopting a study design because it is consistent with the *status quo*. Under the critical perspective, researchers are encouraged to participate in the research process, and take action to evoke change, specifically with regards to power imbalances. Changes can be made to better the experiences of others, alter ways of thinking, and to promote education and learning. From the planning stages of this project, my personal goal was to evoke change by exploring how language is used to propagate marginalization, prejudice and discrimination. My focus is on emphasizing how we as Canadians can build inclusive, healthy communities through the development of respectful and inclusive discourse and by acknowledging how dominant cultural groups use language to maintain their hegemony and reinforce existing cultural power imbalances between the dominant and minority groups. Before being able to evoke change throughout broken social systems, issues stemming from inequality need to be discussed in public platforms so to

educate the general public, who may be ignorant of the effects of language use on perpetuating prejudice and discrimination. Essentially, change cannot occur if current practices in discourse are maintained, and if the public is not made aware of the effect that language-use has on beliefs at the larger societal level. While the current study has no specific hypotheses, upon reading the media research involving media representations of Aboriginal Canadians, it was my intuition that the study would yield findings suggesting that the media uses discourse that perpetuates prejudice and discrimination.

In spite of my earlier statements, as a researcher, I endeavoured to put my beliefs aside throughout the research process in order to examine these media publications without personal bias. That being said, if I truly believed that media representations of Aboriginal health were inclusive it is likely that I would have chosen an alternative topic for this project. My personal beliefs aided in the development of the research question and the methodology; however, throughout the research process, my beliefs had to be suspended in order to effectively explore the types of discourse represented throughout the media selected for this study. I believe that Crotty's (1998) perspective is suitable, in that one cannot fully disconnect from the values that drive us to perform one type of research over another. My bias, and my frustration with what I perceive to be the propagation of marginalization through language (as seen in media research on Aboriginal issues) were both the driving forces and the largest hurdles throughout this research process. I do not see the value in belonging to a nation where *othering* is a common occurrence, a nation that disregards communities of people because of class, culture or biology. Throughout this research journey, my personal aim was to

demonstrate that language may be playing a part in the marginalization of *others* and that there is room for changing the way we speak to one another in order to promote equality.

By using CDA techniques, my hope is that I can start a discussion regarding the perpetuation of beliefs that promote inequality, power imbalances and discrimination - all issues that are on-going for Aboriginal Canadians. However, pragmatically, this was a difficult task. Previously, I had experience in qualitative research, specifically conducting interviews, interpretive phenomenology, and grounded theory; however, I lacked practical knowledge in how to execute a CDA. I was also naïve as to the amount of time that was needed to perform the task in order to fulfill my goals. Thus, the difficulties in conducting this study not only stemmed from attempting to put my beliefs aside, but also in expanding my expertise as a researcher.

Fortunately, my values and beliefs coincide with the fundamentals of CDA, allowing for ease and interest throughout the learning process. My previous research experience evaluated power differentials and marginalization; thus I was not ignorant of the ideals that CDA was built upon, however the analytic process was a new endeavour. Learning strategies and best practices as I read and practiced CDA aided immensely in conducting my analysis. However I know that I have merely touched upon the amount of data that could have been gleaned from the media articles had I previous experience in the field.

My goal in learning and executing new research methodologies is to appeal to policy makers, media outlets and consumers through the delivery of results that speak to the quality and truth behind how we, as the dominant group, are taught to perceive *the other*. Secondly, my intention is to explain the impact that the media has had in aiding to

shaping attitudes with regards to minority groups in Ontario. I believe that discourse and linguistic devices are powerful tools that can change, or maintain the shape and structure of our social system. Understanding the impact that language has on perpetuating inequality is merely the first step in building a healthy, inclusive community.

Chapter 4: Methodology

The methodology utilized throughout the current research was intended to be consistent with the constructionist frameworks discussed in the Theoretical Positioning chapter (see the discussion on Crotty, 1998). My goal in addressing the research questions was to better understand how the media writes about Aboriginal health and what messages are being propagated. Through the research process, I assessed the discourse and narrative used by journalists to report on issues concerning Aboriginal communities and Aboriginal health. I adopted specific methodological elements of CDA into a thematic analysis in order to interrogate three online media sources: The National Post, The Globe and Mail and the CBC. The decision to use these publications is consistent with previous media studies that used a variety of mainstream publications throughout Canada including The Globe and Mail, and the CBC (Harding, 2005; Krebs, 2011; Sloan-Morgan & Castleden, 2014; Strega et al., 2014). Wilkes et al. (2010) performed their analysis using articles collected from The Globe and Mail, but noted that the National Post would have been used as a source had it been in publication at the time of data collection. Salient themes found throughout the analysis of media articles were compiled to answer the following research questions: What Aboriginal health issues were being discussed in print media? How are Aboriginal health issues represented in print media? Does print media propagate power imbalances between the general population and the Aboriginal population in Canada?

Owing to the epistemological stance of the researcher and exploratory nature of the study, there were no formal hypotheses. However, there were some expected outcomes stemming from the research. It was expected that health topics covered through

media articles would coincide with prevalent topics found in formal reports, and academic journals, as discussed in the introduction. Using thematic analyses combined with devices coopted from CDA, I was able to examine salient themes found in the language and content of media articles. Table 4.1 provides an outline of the steps used to conduct the analysis. A detailed description of the steps, and the devices used to conduct the thematic analysis using CDA techniques is included below.

Table 4.1

Description of Methodology by Step

Steps	Procedure
Step 1	Collect all articles gleaned from the 12 search combinations
Step 2	Manually searched, using <i>find</i> command, for the search words throughout each article gleaned from Step 1
Step 3	Developed coding system Omitted Duplicates, internally, but not between publications. E.g. omitted duplicates from The Globe and Mail.
Step 4	Review of articles that met search criteria Assessed for Aboriginal Voice Assessed relevance to Aboriginal Health Included brief note regarding the topic of the article
Step 5	Thematic analysis using the four CDA devices Assessed language and content of articles Created detailed notes, including quotations Explored salient themes found throughout the analysis
Step 6	Isolated articles that pertained directly to Aboriginal health Performed analysis as described in Step 5, using CDA devices

Steps 1 through 6 included building a database of print media and the subsequent analysis of the collected articles (see Table 4.1). Articles were gathered over a two-year timeframe (from September 2012 to September 2014) from three representative sources:

the National Post, The Globe and Mail and the CBC. It was believed that these three publications reach a wide demographic range throughout the province of Ontario, thus demonstrating a fairly representative picture of what information Ontarians can access through online print media (Deignan, 2013).

Step 1 included building a database using online search engines to compile all articles, excluding opinion pieces, stemming from four searches between the three media publications (resulting in a total of twelve separate searches). The search words were chosen in order to expand the outcome to all possible articles relating to Aboriginal health. The word *health* was used in each search owing to the definition of health provided in the introduction chapter. This procedure was adopted based on previous media studies that utilized online search engines and multiple search words in order to collect data (Harding, 2005; Jiwani & Young, 2006; Sloan-Morgan & Castleden, 2014; Strega et al., 2014; Wilkes et al., 2010). See Table 4.2 for a list of the searches that were conducted. All articles that resulted from the search were compiled into an initial database; see Appendix A for an example.

Table 4.2

Publications and Search Words Used to Gather Media Articles Relating to Aboriginal Health

Publication	Search Algorithms
National Post	Aboriginal + Health + Ontario
The Globe and Mail	Native + Health + Ontario
CBC	Indigenous + Health + Ontario First Nations + Health + Ontario

Note. Searches were performed using the online publications. National Post: <http://www.nationalpost.com/index.html>, The Globe and Mail: <http://www.theglobeandmail.com>, and CBC: <http://www.cbc.ca>. Searches were completed using the homepage search option.

Step 2 included a manual review of each article that was compiled in Step 1 in order to assess whether the articles contained the search words. Step 2 was included as many of the search results did not pertain the words *Aboriginal*, *health*, or any of the other search combinations that were used to build the initial database in Step 1. Articles were selected for Step 2 if they contained each of the three search words from the four search algorithms in Table 4.2. Articles that met search criteria in Step 2 were then included in Step 3, where a database was compiled that included all articles that met search criteria. Each article was also assigned a number, coded from most recent, September 2014, to least recent, September 2012. See Table 4.3 for a guide to the coding practices. The coding system allowed the researcher to locate each publication with ease, track relevant quotations, and aided in the exploration of salient themes.

Table 4.3

Guidelines for the Coding System used to Organize Media Articles

Code	Publication	Search Words
N	National Post	
G	Globe and Mail	
C	CBC	
FN		First Nation
I		Indigenous
A		Aboriginal
N		Native

Note. The publication was included as the first letter in the coding system, followed by the search word, for example an article from The Globe and Mail gleaned from the search *First Nations + Health + Ontario* was assigned the code G (The Globe and Mail) FN (First Nations), followed a by number according to the date of publication, for instance GFN01.

In Step 3, duplicate articles were coded with two asterisks (**) to avoid analyzing the same article twice (for example, articles from the National Post catalogued under the search, *Aboriginal + Health + Ontario* may have also have met search criteria under

Indigenous + Health + Ontario). Duplicate articles were coded within each publication (the National Post, The Globe and Mail and CBC), but not between publications, as no duplicate articles were found between publications. Once the catalogue and initial coding was complete, duplicates were removed and the remaining articles moved into the Step 4 analysis.

Step 4 consisted of a review of all remaining articles to assess whether there was an Aboriginal voice present throughout the article, (Y = Yes, N = No, S = Some), whether the article pertained directly to Aboriginal health issues (Y = Yes, N = No, S = Some), and a brief note outlining the main topic of the article. Articles were coded as having an Aboriginal voice if they included a quotation, or the perspective of an Aboriginal person. At Step 4, articles were further coded as *irrelevant* if they contained the search words but did not pertain to any Aboriginal issues. These articles were subsequently omitted from the Step 5 analysis.

Step 5 consisted of a thematic analysis using CDA devices of all print media material that survived the culling process described above. Machin and Mayr (2012) discussed that CDA is particularly concerned with the relationships between language and power/ideology (also see Wodak & Busch, 2004 for discussion). Fairclough and Wodak (1997) argued that public writing can be considered a form of discourse or social practice that is dialectical, sustains the social status quo, is responsive to social forces, and can help (re)produce unequal power relations between social classes and ethnic/cultural majorities and minorities. In order to address the research questions pertaining to power dynamics portrayed in the media, the researcher felt that coopting aspects of CDA provided the most suitable avenue for the thematic analysis.

Van Den Hoonaard (2012) suggested that a thematic analysis provides a platform through which researchers can discuss phenomenon occurring within the social world. Van Den Hoonaard (2012) describes a series of steps through which a thematic analysis can be conducted, including gathering information on a micro level, then combining the information into macro level themes. For the present study, the four CDA devices below provided the researcher with the tools to perform the micro level analysis that later served as a vehicle through which to bring together themes seen in the media coverage of Aboriginal health.

In the realm of communication research, agenda setting theory has been proposed as a means through which the media focuses on specific stories, or on particular points within a story that help to encourage readers toward a specific point of view (Shah, McLeod, Gotlieb, & Lee, 2009). For example, Strega et al. (2014) suggested that the media was responsible for the national discourse of what they termed *victim versus vermin* with regards to valuing the lives of missing and murdered Aboriginal women. The researchers suggested that by describing missing and murdered Aboriginal women as prostitutes and drug addicts, and other women as good daughters and loving mothers, the public is pointed toward sympathy for some victims while attributing some disappearances to risky, *vermin*-like lifestyle choices. Owing to the importance of the media in relaying information to the public, agenda setting is a large contributor to what readers will almost unconsciously accept and deem as important, and will contribute to the public's knowledge base. Studies on agenda setting have also suggested that over and above directing readers through coverage of particular events and topics, the media directs reader opinion on those topics (Entman, 1989). Entman (1989) suggested that the

media uses information processing theory to direct readers toward a manner of thinking. Essentially, the media suggests the meaning that a reader should ascribe to a media publication through commonly held values and beliefs. According to Entman, this process may remove a sense of agency from the reader's meaning-making process by assigning an authoritative meaning for readers. Harding (2005) suggested that reporters tap into stereotypes using language to infer that readers *ought* to hold particular beliefs as givens or common sense notions. Harding termed this type of manipulation the *common sense* model, as readers were encouraged to accept the medias coverage as a value that should *obviously* be upheld.

Entman's (1989) interpretation of agenda setting theory closely aligns with framing theory, which suggests that a reader's interpretation of an event seen in the news is fashioned through specific semantic devices used to frame and deliver information (Goffman, 1974; Druckman, 2001). Aspects of CDA were used in the present thematic analysis to investigate the degree to which the principles of agenda setting theory, the common sense model and framing theory were used to sway or direct reader opinion. In order to explore agenda setting theory and framing within the scope of possible CDA devices, four aspects were selected: 1) overlexicalisation, 2) structural oppositions, 3) functional nomination and nominalization, and 4) concessions and hedging (Machin & Mayr, 2012; Wood & Kroger, 2000).

According to Machin and Mayr (2012) overlexicalisation involves descriptive words used to evoke a particular impression or opinion in a reader. Usually overlexicalisations set a subject apart from the normative group. For example, seeing the term *male nurse* sets a male nurse apart from a female nurse, giving the impression that

the reader should also commonly also make this distinction. Overlexicalisations can be used to suggest differences in power dynamics, positioning a particular group or person away from another group, or marginalizing the subject for the reader.

Structural opposition is a semantic strategy used by writers to evoke feelings of separation between the readers and the subjects of a story. This strategy uses language to suggest a feeling of *us versus them* in readers (Machin & Mayr, 2012). The theme of *us versus them* was previously mentioned in the introduction when referencing Harding's (2006) research on media pertaining to four prolific events in Aboriginal history.

Structural oppositions is a device that aids in establishing psychological distance between the reader and the subject, for example, using the words *militant* or *terrorist* rather than the word *soldier* to describe an opposing force. The words *militant* and *terrorist* attempt to direct the reader toward a specific opinion, helping to sway the reader toward a particular negative point of view (Machin & Mayr, 2012). This technique was also seen in Strega and colleagues (2014) where missing and murdered Aboriginal women were framed as *vermin* to set them apart from the general population.

Structural oppositions may also aid in creating superordinate or subordinate groups throughout a piece of writing, inferring a hierarchy for the reader. Structural hierarchies that depict power differences can be accomplished through the use of language, as in the example above, but may also be implemented through the strategic use of grammar. For example, using uppercase to indicate a proper noun to describe one group while using lowercase lettering, or a common noun to describe another group. An article featuring the proper noun *Prime Minister* alongside the term *first nations chief* provides readers with an indication of which subject is more powerful. A study

performed by Retzlaff (2005) suggested that power imbalances can be implemented by the media using proper and common noun labelling strategies. Creating hierarchies through grammatical means allows journalists to covertly create power differences and may infer an *us versus them* mentality in readers.

Nominalization is a linguistic strategy used to covertly remove accountability and to create the illusion of fact through the removal of the main actor from a sentence. For example, *several communities have become ill owing to lack of accessible healthcare*, removes the agent from the sentence, which reduces accountability from the parties responsible for providing care. Rather than *the lack of funding from government agencies has led many to become ill owing to an inability to access health services*, the first sentence covers a newsworthy topic without providing readers with all of the necessary pieces to conclude a well-informed opinion. The second sentence specifically outlines the parties that are accountable and the reason for the increases in illness. Essentially, nominalizations can be used to compact or omit details of a story in order to aid in story spinning, as seen in the example above where the accountable parties and the cause for illness are omitted from the text. Nominalizations may also use language that allows readers to feel that action is being taken, where no action has occurred. For example, the sentence, *we are strongly committed to reducing pollution throughout the city*, may provide a reader with the sense that city officials are working to reduce pollution; however, upon closer examination, no actions have been described.

While nominalization strategies remove agents from a news story, functional nominations covertly provide readers with information regarding power dynamics through the use of titles, repeating titles or removing titles. For example, *Prime Minister*

Justin Trudeau bears more weight than *Justin Trudeau*, or *Justin*. Journalists can use functional nominations in order to demonstrate which subject is more powerful throughout an article. For example a publication that uses the title, *former Prime Minister Stephen Harper* alongside the title *Justin* insinuates that the reader should see Stephen Harper as a powerful subject, and Justin (Trudeau) as a less powerful subject throughout the publication. Indeed this strategy was very common among many mainstream publications during the recent election campaign. For the current analysis, nominalization and functional nominations were combined into one device as they both make use of labelling and titles to infer power differentials or to frame subjects in a specific way.

The last devices that were used as a point of analysis were concessions and hedging. Hedging is a technique that creates vagueness or ambiguity in writing, while maintaining the illusion of fact or delivery of information. Examples of hedging include: *I think, in my opinion, or many people believe*. Concessions perform a similar task in that they relay information to the reader while covertly planting doubt to sway the readers' opinion in a specific direction. Examples of concessions include: *but, may, and could* (Wood & Kroger, 2000). Wood and Kroger (2000) argue that *but* signals the end of a concession; however, for the present study, I argue that the word *but* can be used after a fact based comment is made in order to sway the reader in the opposite direction, for this reason, the word *but* will be considered a concessions throughout the thematic analysis. Both hedging and concessions are techniques used by writers to create the impression of fact, or to encourage a premeditated reader-opinion. Table 4.4 provides summarized descriptions for each of the devices.

Table 4.4

Summary of Devices, Explanations and Examples

Devices	Explanation	Example
Overlexicalisation	Excessive descriptive that overemphasizes for the reader	<i>Male nurse</i>
Structural Oppositions	Opposing descriptions that provide frame for the reader	<i>Militant versus Solider</i>
Functional Nomination/ Nominalization	Removes accountability or the agent or may create the illusion of information but say very little. Insinuates power imbalances or inequality in text.	<i>Prime Minister Justin Trudeau versus Justin Trudeau</i> <i>Several communities have become ill owing to lack of accessible healthcare versus the lack of funding from government agencies has led many to become ill owing to an inability to access health services</i>
Concessions and Hedging	Planting doubt, or swaying the reader in a particular direction Create vagueness or ambiguity in writing.	<i>but, may be, and could</i> <i>I think, in my opinion, or many people believe</i>

Note. Explanations and some examples taken from Machin, D., & Mayr, A. (2012). *How to do discourse analysis*. London: Sage Publications Ltd. and Wood, L. A., Kroger, R. O. (2000). *Doing discourse analysis: Methods for studying action in talk and text*. Thousand Oaks, CA: Sage Publications Inc.

Each of the articles included in Step 5 were analyzed using a colour coding system that allowed the researcher to identify when and how authors used the four devices, described above. The colour coding system was implemented to highlight aspects of the text that exemplified the devices, and to record salient quotes that were later recorded in the results section. Van Den Hoonaard (2102) and Hesse-Biber and Leavy (2011) suggested using memos in the initial stages of a thematic analysis in order

to gather information, thus detailed notes were taken during Step 5 to aid in an examination of the semantic configurations of the texts for the production or reproduction of stereotypes and representations of the 'other'. The memos were gathered systematically and recorded in a Step 5 database using Microsoft Excel. The notes or memos were used for the micro level analysis that later aided in compiling larger themes discussed in the results section (see Van Den Hoonaard, 2012, for detailed account of thematic analysis using a critical perspective).

Step 6 was added to the methodology after the analysis in Step 5 revealed that the media focus had not been on Aboriginal health, making the research questions difficult to answer. Thus, Step 6 consisted of parsing out articles that pertained directly to Aboriginal health issues. A separate database was built for Step 6, and an analysis was completed to isolate possible themes that emerged when only examining articles pertaining directly to health issues (see Appendix C). The goal in isolating the articles pertaining to health was to explore whether additional themes would emerge in media publications when specifically discussing Aboriginal health issues, and whether themes found throughout health publications differed from the themes found in the Step 5 analysis. The Step 6 analysis used the same methodology as outlined for the Step 5 analysis, including a thematic analysis using the four CDA techniques that were described above. The information gathered from the thematic analysis in Steps 4 through 6 were used to address the research question listed above. To increase validity and reliability for the Step 5 and Step 6 analysis, a second researcher conducted some analyses on the media articles, and compared results to those from the Step 5 and 6 analysis to ensure consistency in thematic development.

As discussed in the introduction, Van Dijk (1995) suggested that media sources are an effective means of communicating messages from positions of authority in order to shape perceptions and beliefs. Further, Milkie's (1999) media influence theory suggests that media can be used to propel messages to the wider population for the purpose of changing or shaping popular opinion. By upholding the fundamental qualities of social constructionism and critical theory, as discussed in the previous chapter, the methodology used throughout the present study allowed the researcher to identify salient themes throughout popular media using thematic analysis and aspects of CDA. The following chapter outlines the thematic results, organized from Step 1, the initial web-based searches of media articles, through to the thematic analysis resulting from the CDA devices in the later steps.

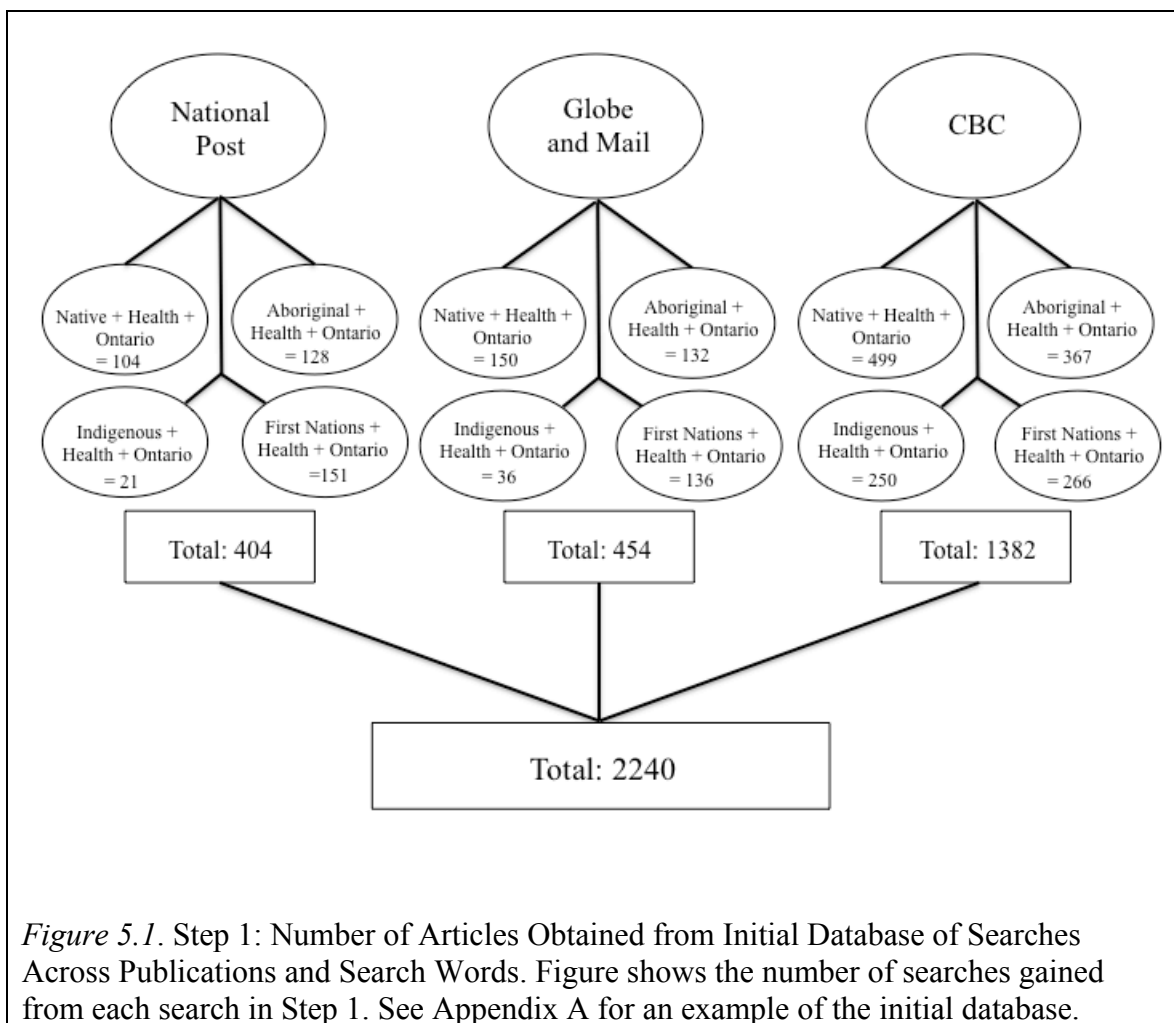
Chapter 5: Results

As described in the preceding section, the research took place in six steps. Steps 1 through 6 included building a database of appropriate print media and subsequent analysis of the collected data. The methodology outlined in the previous chapter was designed to address the following research questions: What Aboriginal health issues are being discussed in print media? How are Aboriginal health issues represented in print media? Does print media propagate power imbalances between the dominant and Aboriginal cultures? Step 1 began by gathering articles from three online media sources: the National Post, The Globe and Mail and CBC. Figure 5.1 shows the number of searches that were gleaned from each search across publications.

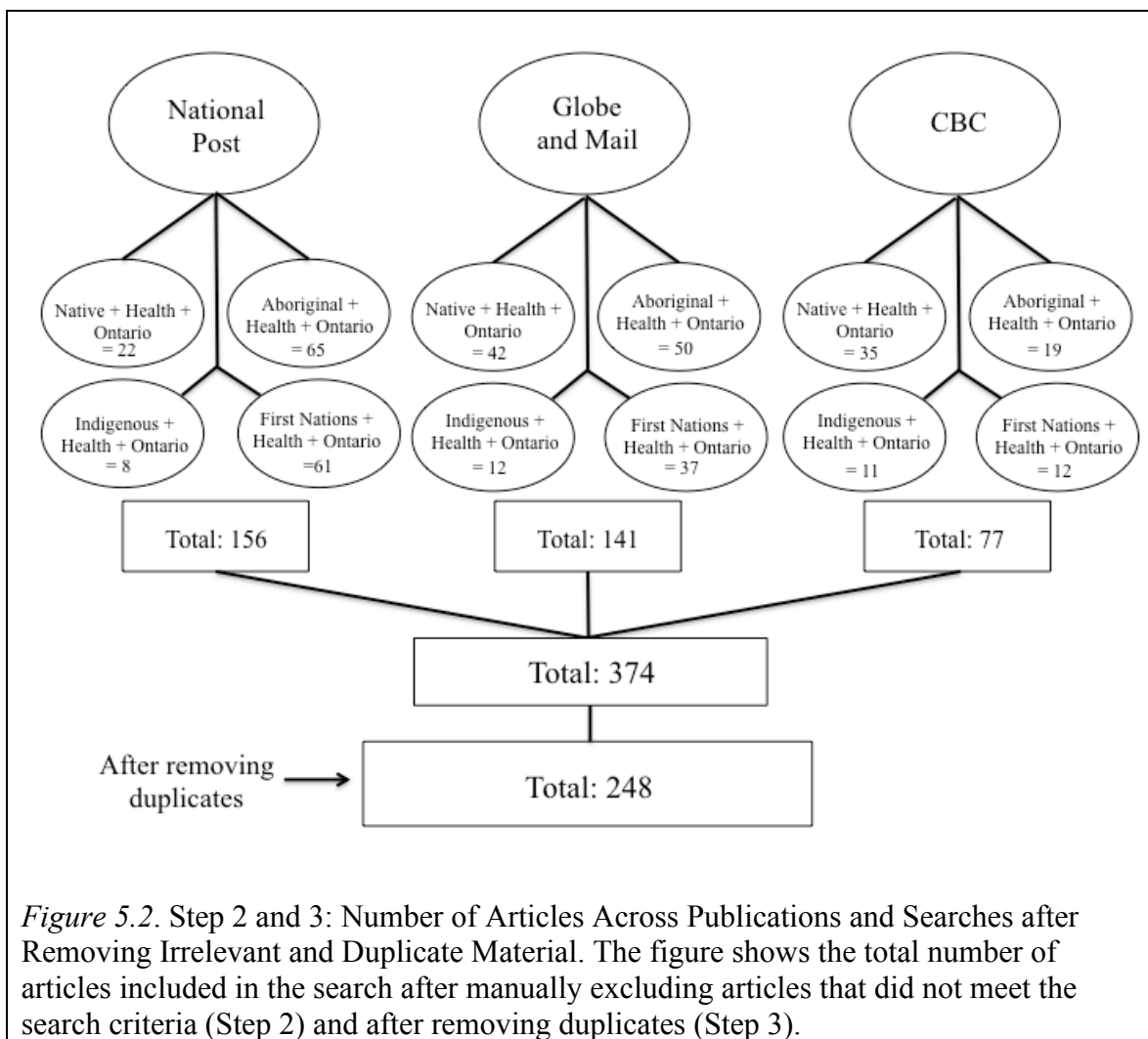
Step 1 through 3

Upon inspection, many articles garnered from the initial search did not actually include the entire search algorithm (i.e., Native + Health + Ontario) thus, in Step 2 a manual search was performed within each article for the search words used to build the initial database. Articles that did not contain the search algorithms were excluded from the analysis, resulting in a reduction in the number of relevant articles. Figure 5.2 shows the reduction of articles across each search.

After the articles were manually assessed for search criteria in Step 2, 374 articles remained which is a reduction of 1866 articles from the original search. Such a large reduction in the number of articles exemplifies the difficulty one may have when seeking out information related to Aboriginal health, as many of the articles gleaned from the initial search in Step 1 were unrelated to Aboriginal issues.



A coding system was implemented for all articles that met the search criteria, prior to the removal of duplicates. Coding each article allowed the researcher to organize printed material and it also served as an index during the analysis to locate articles and relevant quotations (see Table 3.4 for an explanation of the coding system). Of the 374 articles that remained after the manual search in Step 2, 126 were duplicates, resulting in a further reduction and lowered the total number of articles to 248 during Step 3.



Step 4

Step 4 consisted of a review of articles to assess whether they featured an Aboriginal voice (coded Y = Yes, N = No, S = Some), whether the article pertained directly to an Aboriginal health issue (coded Y = Yes, N = No, S = Some), and a note on the overall topic. Table 5.1 shows the results for Aboriginal Voice and Health. During Step 4, articles were also coded *irrelevant* if they did not contain content relating to an Aboriginal issue, even if they contained a combination of the search algorithm. Ergo, an

additional 40 publications were removed from the analysis, resulting in a total of 208 articles moving into Step 5.

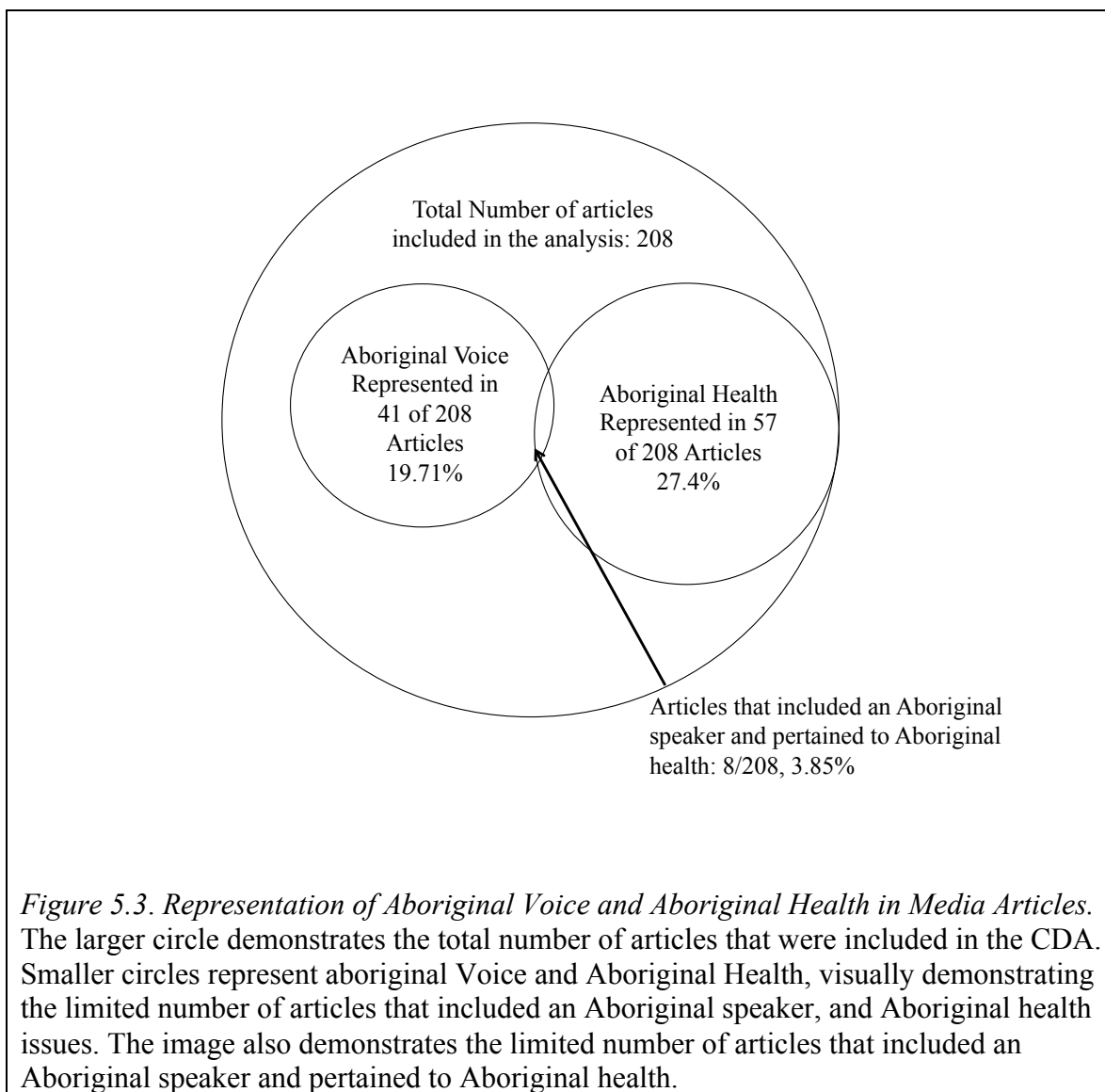
Table 5.1.

Step 4 Analysis Showing Number of Articles that Included an Aboriginal Voice and Pertained Directly to Aboriginal Health Issues

	Yes	No	Some
Includes Aboriginal Voice	41	124	43
Pertains to Aboriginal Health	57	121	30

Note. Articles that included Aboriginal speakers were considered to include Aboriginal voice. Articles that did not feature Aboriginal speaker(s) were considered to be without Aboriginal voice. In some cases, a small degree of Aboriginal voice was provided; those articles were catalogued in *Some*. Articles that were directly related to Aboriginal health were coded *Yes* and articles that mentioned some Aboriginal health issues but where Aboriginal health was not the focus of the article were catalogued as *Some*.

The Step 4 results indicated that 19.71% (41/208; coded *Y*) of the articles contained an Aboriginal voice, while 20.67% (43/208; coded *Some*) provided some Aboriginal voice throughout. Looking at Aboriginal health, 27.4% (57/208; coded *Y*) of the articles pertained directly to Aboriginal health, while 14.42% (30/208; coded *Some*) discussed some aspect of Aboriginal health. Of the 208 relevant articles, 3.85% (8/208) pertained directly to Aboriginal health and provided an Aboriginal voice. Figure 5.3 demonstrates the degree to which Aboriginal voice and Aboriginal health were represented in the media articles as represented by a Venn diagram. During the Step 4 analysis, the main topic of each article was recorded (see Figure 5.4). The list yielded 34 separate topics across the 208 articles analyzed. An examination of the topics covered throughout the media revealed that 54 of the 208 articles pertained directly to an Aboriginal health issue.



Topics	Number of Articles
Crime and Justice	12
Mercury Poisoning	6
Flood/Evacuation	3
Child and Youth Welfare	4
Suicide	6
Housing and Homelessness	7
UN Special Reports	2
Cancer - Health	5
Diabetes - Health	1
Poverty/Food Access	3
Treaty Rights/Rights	50
Water	3
IRs	4
Industry/Development	18
Employment	2
Access to healthcare	8
Health - General	13
midwifery - Health	3
Prostitution	2
Social Programming	1
Politics/Policy	13
Education	3
HIV/AIDS - Health	1
Economics	1
Pollution/Living Conditions	3
Nutrition - Health	2
Health politics	7
Band Management	6
Racism	1
Dental - Health	2
Mental Health	3
Domestic Abuse/Violence	2
Aboriginal Traditions	7
Substance Abuse	4
Total	208

Physical Health	
Diabetes	1
Cancer	5
Access	8
General	13
Midwifery	3
HIV/AIDS	1
Nutrition	2
Dental Health	2
Mercury Poisoning	6
TOTAL	41

Mental Health	
General	3
Suicide	6
Substance Abuse/Addiction	4
TOTAL	13
TOTAL (Phys + Mental)	54

Figure 5.4. List of Topics Gleaned from Step 4 Analysis. The figure shows the list of topics that were found within the 208 articles analyzed during Step 4. Topics related to Aboriginal physical and mental health were segregated to provide an indication of the Aboriginal health topics that have been discussed in the media from September 2012 to September 2014.

Rather than excluding all articles that did not pertain directly to Aboriginal health for Step 5, a thematic analysis was performed on all 208 articles. Including all 208 articles that met the search criteria allowed for a larger sample and a wider examination of media representations of Aboriginal issues. Research conducted by Frohlich and colleagues (2006), Bombay and colleagues (2014a), Big-Canoe and Richmond (2014) and Maxwell (2014) have suggested that larger systemic issues such as poverty, historical trauma, oppression, discrimination and colonization contribute to negative health

outcomes for Aboriginal Canadians. Owing to the insights provided by these researchers, an inclusive approach was taken when considering articles for the thematic analysis. As Bronfenbrenner (1989, 1994) explained, there is a bidirectionality in the relationship between macro- and micro-systems; thus, articles that pertained to an Aboriginal issue, and contained the search algorithm may contribute to a wider understanding of media coverage on Aboriginal health.

The Step 5 analysis included systemically reading and analyzing each of the 208 articles. Each article was read, and colour coded according to the CDA devices described in the methodology section (refer to Table 3.4 for a list and explanation of CDA devices used). Notes regarding each of the devices were collected in a database as well as relevant quotations exemplifying the CDA devices (See Appendix B for an example of the database). In order to describe the Step 5 analysis, I will begin by discussing common themes found when analyzing the language used within each separate device. After the description of the themes that emerged when examining the four linguistic CDA devices, I will describe common themes found throughout the media articles according to the content. Finally, I will describe the findings upon considering the four linguistic devices and the content (thematic analysis) of the media articles together. During the time period wherein the articles were gathered for this analysis, the Idle No More movement and Chief Theresa Spence's hunger strike were popular throughout news publications. Fifty of the 208 articles included coverage of the Idle No More movement and Treaty Rights for Aboriginal Canadians. As a result, much of the thematic analysis will centre on coverage of both topics. While Idle No More and Chief Spence's hunger strike are politically motivated movements, I believe that the health and wellbeing of Aboriginal

Canadians is directly related to the motivations behind each movement, namely treaty rights and colonization (see discussion on Frohlich and colleagues, 2006; Maxwell, 2011; and Bronfenbrenner, 1989, 1994).

Step 5

Overlexicalisation. Overlexicalisation, as described in the methodology section, is the use of descriptive words to evoke particular impressions in readers in order to sway opinion (Machin & Mayr, 2012). Upon analysing media articles for this device, an overall theme of negative word use was revealed. Table 5.2 provides a list of examples used to negatively frame Aboriginal issues. This type of word use may have aided in swaying the reader toward negative thinking about Aboriginal issues, creating a potential power difference between the dominant cultural group and Aboriginal Canadians.

Evidence of negative framing was seen in a statement made by Theresa Spence, the Chief of Attawapiskat, during the hunger-strike that she hoped would result in better living conditions and respect of Treaty rights for Aboriginal Canadians. In the example the author demeans Spence by writing, “In a brief, rambling statement, Spence criticized Harper for earlier remarks he made about millions of dollars going into the Attawapiskat reserve” (CN31). The overlexicalisation *rambling* robs credibility from the *statement* and suggests that readers should feel that Spence’s statement lacks merit.

Table 5.2

Examples of Negative Word Use

Article	Word Use	Full Quotation
CN13	rampant	“the rampant problem of mould contamination in houses on reserves”
CI04	agonizing	“Brant Children’s Aid society says the Sault case was an agonizing decision”
CN31	rambling	“In a brief, rambling statement, Spence criticized Harper”
CN34	alarming	“an alarming number of aboriginal Canadians are engaging in risky behaviour”
GN36	challenge, front, confrontations	“The court challenge is just one more front in a series of confrontations facing the Harper government”
GA42, NA33, NA59, NA42, NA46	troubled	“the troubled First Nation of Attawapiskat”, “the troubled reserve”, “troubled Attawapiskat First Nation”, “chief of the troubled Attawapiskat First Nation”, “troubled northern Ontario reserve”
NA04	generally, heavily	“Canadian Aboriginals are generally heavily prone to the standard of life risks”
NA06	gravely, refusing, claims	“the gravely ill child who is refusing chemotherapy...claims to have been visited by Jesus Christ”
NA47, GFN25, GFN29, GA19	scathing	“the scathing audit”
NA53, NA56, NA64	remote	“chief of a remote reserve in Northern Ontario”, “remote Northern Ontario reserve”, “remote First Nations

The words used to describe the activities of participants in the Idle No More movement and Spence's hunger strike varied, creating differences in how the stories were framed and potential differences in the feelings they may have evoked in readers. For example, using the words *demonstration* (CN31, CN33), *rallies* (CN31), and *activities* (CN31) insinuate a lesser degree of violence and disruption as compared to using the word *protest* (CN30), or the words, *protestors* (CN31, CN33), *protest movement* (CN32) or *first nations protestors* (GFN33). Using the word *protest* insinuates a larger degree of aggression, indicating that readers should feel fear or uneasiness toward movements over what would be felt if a *demonstration* were taking place. Further, placing *first nations* in front of *protestors* puts accountability on all First Nations communities for any violence that occurred throughout the activities. By placing accountability on First Nations communities, the authors are suggesting an *us versus them* narrative throughout the news coverage. The suggestion that First Nations communities are responsible for civil unrest through protest movements supports the narrative of creating distance between First Nations communities and the general population in Canada.

The overlexicalisations, *troubled* and *remote* were often used throughout media articles to describe First Nations communities in Ontario, particularly when covering stories on Attawapiskat First Nation. Authors may be using the overlexicalisation *troubled* to provide readers with a vague sense of difficulty, without applying accountability or details. By using the vague description *troubled*, authors can attempt to sway reader opinion without providing concrete information regarding the origin of the trouble, potentially creating the illusion that useful information is being relayed. In addition to the word *troubled*, the word *remote* was also used to describe Northern First

Nations. Placing the word *remote* before *reserve* may create a sense of physical and psychological distance between readers and First Nations communities. The creation of distance can reduce the amount to which a reader may relate to First Nations; thus, when the media does cover hard-to-swallow issues pertaining to poverty, living conditions, health or clean water, readers are more likely to see the stories as ‘fairy tale’ like rather than fact, limiting the amount of sympathy or understanding felt by the reader. The psychological effects of using language to create distance provides readers with the ability to compare issues in First Nations communities to myths, fairy tales or historical fiction. The word *remote* can be compared to the phrase *long ago, in a land far away*, in that it potentially orients the reader toward a mythological way of thinking.

Examples of negative framing also appeared covertly in media articles, for example, the story of Makayla Sault, a young Aboriginal girl diagnosed with cancer, who wanted to abandon Western medicine for Aboriginal healing. In CI04, the reader is pointed toward relating to the Children’s Aid Society’s decision to remove the girl from her home in order to force her into chemotherapy. The covert use of overlexicalisation was seen in the example, “the executive director of the Brant Children’s Aid society says the Sault case was an agonizing decision” (CI04), which insinuates that the reader should sympathize with the director’s decision by comparing it to physical pain. The word *agonizing* provides readers who disagree with the Children’s Aid with the opportunity to sympathize with the difficulty of the decision, lessening the amount to which the reader may find fault with the decision maker. Framing topics using this type of overlexicalisation may result in directing reader opinion toward a specific point of view. In this example, the author may be attempting to sway the reader toward supporting the

Children's Aid Society rather than educating readers regarding the difficulties that Aboriginal families face when choosing alternatives to western medicine.

As seen in the examples above, negative overlexicalisations can create the ability to frame articles in a specific way, potentially swaying popular opinion. Repetitive use of negative overlexicalisations may contribute to propagating negative, prejudicial opinions of First Nations communities. Using overlexicalisations to create distance, by insinuating violence through activism or by creating the mythology of the *remote* First Nation communities, readers are allowed the opportunity to feel that the issues plaguing First Nations are again, fairy tales or deserved owing to their inability to act as peaceful, civilized members of the larger community. Through the examples discussed above, I suggest that the media has made an effort to turn the focus away from the real issues faced by Aboriginal Canadians, positioning the focus toward wrongdoings on the part of Aboriginal Canadians. By casting negative attention toward Aboriginal communities the media may be attempting to position Aboriginal people as less powerful than the rest of Canadians. The theme of disrespect, creating an unequal power balance between Aboriginal Canadians and the dominant cultural group, was also carried through the use of structural oppositions.

Structural Oppositions. Structural oppositions may occur in text in an effort to evoke an *us versus them* feeling in readers, or to direct the reader toward power figures within a publication (Machin & Mayr, 2012). Throughout the media articles included in this research, structural oppositions may have been used to suggest that Aboriginal Canadians were of less importance than other Canadians, or that being Canadian is more powerful than being Aboriginal. Structural oppositions were seen consistently across

many articles through the use of upper and lowercase lettering, which differentiates groups by proper and common nouns. Using upper and lowercase lettering to denote power provides authors with the ability to frame a group of people as less powerful without overtly describing them negatively to the reader. For example, repetitive use of *aboriginal* rather than *Aboriginal* may suggest a lesser degree of power, especially when seen next to the word *Canadian* rather than *canadian*, which was not seen in any media articles. For readers, the use of proper nouns, such as Canadian, may typically be seen as a sign of respect, while using the word *canadian* may not resonate well with Canadian readers.

Culpeper and Haugh (2009) suggested that the use of proper nouns, such as Canadian or English, may provide readers with assumed connotations such as level of prestige, social class, race or intellectual competence. As such, I suggest that when journalists omit *Aboriginal* as a proper noun, they remove any prestige that one may attribute to the cultural group. Further, Pisorski, Watson, and Yli-Jyrä (2009) argued that common nouns, such as table, chair or tree, share *categorical ambiguity* in that they refer to common categories of items. Thus, by using the term *aboriginal* as opposed to *Aboriginal*, the media may be attempting to infer that the cultural group is commonplace or ambiguous. Using the term *aboriginal* to infer ambiguity may further suggest psychological distancing, aiding in the construction of an *us versus them* narrative. The ambiguity that occurs through the use of common rather than proper nouns allows readers to feel that Canadians are a concrete and established cultural group, while Aboriginal Peoples are mysterious, indistinct, and a vague conglomeration of *others*. While the term *Aboriginal* was used as an adjective in some cases (thus negating a need for uppercase), I

argue that the same leniencies would not be used, or seen in media coverage if the term *Canadian* was used in its place. NAHO (2016) has stated that the terms Aboriginal Peoples, Aboriginal Canadians should be used as a proper noun, while the Government of Canada Department of Justice (2015) has stated that the terms Aboriginal People and First Nations People should be used as a proper adjective, written in uppercase.

The use of lowercase lettering to describe Aboriginal Canadians was seen predominantly throughout the National Post, The Globe and Mail and the CBC. While the trend was seen consistently across publications there were exceptions, which could be an artefact of the individual journalist or editor but may also indicate that the use of upper and lowercase lettering is intentionally relaying a message of power. Articles featuring an Aboriginal achievement, for example CN01, which described an Aboriginal program to end homelessness, consistently used the proper noun *Aboriginal*. This result mirrors the findings of Miller (1997), who suggested that achievements by people in minority groups are often covered in media articles using a positive tone, with language that denotes respect, often including a speaker from the minority group. Similar to Miller's findings, articles that demonstrated Aboriginal people as community volunteers used the proper noun *Aboriginal*, insinuating a greater level of prestige and accolade. However, the sporadic or inconsistent use of uppercase lettering across articles suggests that journalists may intentionally use the physicality of upper and lowercase letters to indicate a power difference between Aboriginal groups and other Canadians. For example, NA23, in an article about developing pipelines in Northern Canada, the author consistently used lowercase letters to describe Aboriginal groups, who are often discussed as hurdles for developing the oil industry throughout the nation.

In addition to the use of proper, common nouns and lowercase adjectives to insinuate a power differential, many articles also may have used upper and lowercase lettering to demonstrate that being Canadian was more powerful than being Aboriginal. For example in CN22, an article regarding a UN special report designed to address Aboriginal issues relating to living conditions, poverty, education and healthcare, the author wrote “Anaya will examine what inequalities Canada’s aboriginal peoples face in terms of economic and social rights, education, housing and health.” The placement of *Canada* before *aboriginal* may insinuate ownership over Aboriginal people by describing them as belonging to *Canada*, this alongside the use of upper and lower case lettering may further reinforce power differences. This type of language was also seen in CN33, GFN30, GFN31, GFN36, and GN21. Using the proper noun *Canada* next to lowercase adjective *aboriginal* covertly describes to the reader that being a part of Canada is important and prestigious, or superordinate, while being Aboriginal is more commonplace or subordinate. In GFN07, power differentials were provided between “The French and English” and “aboriginal people,” which provides further evidence for the intentional use of proper nouns, and demonstrates a difference in power not only between Canadians and Aboriginal groups, but between being English, French, and Aboriginal groups.

Similar power differentials were also seen when describing figureheads such as *Prime Minister Stephen Harper* versus lowercase, *chiefs* (GN35). In this example, the article describes Theresa Spence’s hunger-strike, alleged mismanagement of funds by the Attawapiskat band, and Stephen Harper’s role in addressing Spence’s concerns. By using upper and lowercase lettering to denote who is more powerful, readers may develop

opinions as to who is more powerful, prestigious and competent. In GN39, an article covering Theresa Spence's hunger strike, the author wrote "The native leader has so far refused offers of a meeting with Aboriginal Affairs Minister John Duncan, saying she insists on speaking directly with Mr. Harper." This quotation indicates that the role of *Aboriginal Affairs Minister* is more important than the role of *native leader*, through the use of proper and common nouns. The use of proper nouns and titles to denote differences in power were seen throughout publications, possibly further indicating intentionality in word use and writing. The next section will further explore how variation in the use of titles is seen in media articles to indicate power imbalances.

Functional Nominations and Nominalizations. According to Machin and Mayr (2012) functional nominations are used to direct the reader toward who is most powerful in a piece of writing, and nominalizations are used to remove accountability, or create the illusion that facts are being relayed to readers. In the example above, the *Aboriginal Affairs Minister* was provided with more power than the *native leader* through the use of upper and lowercase labelling. Creating power differences and removing accountability through the use of titles, or the lack thereof, was seen predominantly throughout the analysis. For example, in CI10, an article discussing a UN special report on the treatment of Aboriginal Canadians and missing and murdered Aboriginal women, the author placed accountability on "the Harper government" rather than the Conservative Government insinuating to readers that Harper, alone, is responsible for decision-making (also exemplified in articles GN21, NA59, NA53, NA51). By placing accountability on Stephen Harper, rather than the Conservative party, the author is able to insinuate a lack of action by Stephen Harper without insinuating that the federal government in its

entirety, is actionless. In CI10, the author also wrote that “the Assembly of First Nations welcomed Anaya’s remarks and called on Ottawa to give ‘serious consideration’ to his preliminary observations.” Describing the federal government, using the term *Ottawa*, is a functional nomination that aims to remove all accountability from members of the governing party. By describing the government using the vague title *Ottawa*, distance is created between governing bodies and actions made by the government. Upon creating distance, the authors remove accountability from the lawmakers and place it on *Ottawa*, which groups Canadian civilians in with decision makers. Examples of *Ottawa* being used in this way were also seen in CA10, CN32, GFN03, GFN04, GFN07, GFN24, and GN18. This approach was also used to remove accountability from the Ontario government, by describing the provincial government as “Ontario” (CFN01, GFN34, GN20) and “Canada” (NA45). Using the word *Canada* to describe the federal government places readers, civilians and the government alongside one another. The marriage insinuates to readers that they are a part of the decision-making process, creating the illusion of togetherness. The sense of unity that is created through this process may sway reader opinion by propagating feelings of patriotism and strength in solidarity, furthering support for poor decisions and the marginalization of minority groups.

Along with the use of terminology that removes accountability, many media articles also used titles to suggest who was more powerful. For example, using full titles, such as *Prime Minister Stephen Harper* creates a higher impression of power than the term *Harper*, or *Mr. Harper*. In CN16, an article that discussed the timeline of the residential school system in Canada, the author stated that “Prime Minister Stephen

Harper apologizes to former students of native residential schools, marking the first formal apology by a prime minister for the federally financed program.” Using the title of *Prime Minister* creates the impression that Stephen Harper is powerful and that his apology is meaningful. In contrast to the title of *Prime Minister*, in NA59, an article that discusses Theresa Spence and her hunger-strike, the author wrote, “Chief Theresa Spence issued an open letter Thursday to Stephen Harper and Gov. Gen. David Johnson.” By omitting the powerful title of *Prime Minister* from Harper, and including the title *Chief Theresa Spence*, and *Gov. Gen. David Johnson*, it could be argued that the author is attempting to direct the reader toward the most powerful figures, which in this case, is not Harper but is Chief Spence and the Governor General.

Titles were also utilized in conjunction with upper and lowercase lettering in an attempt to point readers toward powerful figures throughout articles. For example, in CN31, an article that discusses Theresa Spence’s hunger strike and Aboriginal Treaty Rights, the functional nominations “First Nations chiefs,” “the Governor General” and “Prime Minister Stephen Harper,” were included. Differentiating figureheads may indicate to readers that being a First Nations *chief* is less powerful than being a *Governor General* or a *Prime Minister* through strategic upper and lowercase lettering. Examples of lowercase *chief* was also seen in GN35, GN40, GI10, NA0, NA34, NA37, NA38, NA41, NA42, NA46, NA47, NA51, NA52, NA53. Through the repetitive use of proper nouns to describe dominant political figureheads, and lowercase lettering to describe First Nations Chiefs, the media may be attempting to relay to readers that First Nations Chiefs do not share the same degree of power that other Canadian officials do. The frequent use of lowercase *chief* reinforces and solidifies power imbalances.

As seen in the examples above, power imbalances may be propagated through the use of proper and common nouns, and by using variations through titles in an attempt to evoke premeditated feelings in readers. The next section further explores how language is used to frame stories in an effort to shape reader-opinion through the use of concessions and hedging.

Concessions and Hedging. Concessions and hedging are devices used by authors to provide the illusion of fact, or to position author-opinion as fact (Machin & Mayr, 2012; Wood and Kroger, 2000). Throughout the analysis, examples of concessions and hedging revealed a pattern of narrative shaping with regards to Aboriginal issues. Table 5.3 provides a list of some examples, along with quotations from the articles. In looking at Table 5.3, words such as *may*, *about*, *some*, and *many* create the impression that facts are being relayed to readers, when in actuality, the words reveal approximations. For example, in CN25, an article covering government-run experiments on Aboriginal children the author writes, “hungry aboriginal children and adults *may* have been used as unwitting subjects in nutritional experiments by federal bureaucrats.” Rather than speaking definitively about the experimentation, the author insinuates doubt through the use of the word *may*. In using concessions and hedging words such as *may*, the author provides the reader with the opportunity to reject the facts being presented, which in the case of government-run experiments on children, may be a benefit to interested parties.

Table 5.3

Examples of Concessions and Hedging

Article	Concessions/Hedging	Quotation
CI02, CN10	our	“our Government has contributed more than \$9 million in compensation”, “Our government from the very outset has said”
CI09, CN25, CN32	May, may not, may be	“may not be sufficient”, “hungry aboriginal children and adults may have been used”, “...to determine what remedy may be required”
CA11,	About/some	“About 60 per cent of the 1.500 residents will have no indoor plumbing”, “Some 60,000 Canadians were singled out
CA18, GFN26	Many believe/of many	“many believe it will end up at the Supreme Court”, “the gut reaction of many”
CN19	chose	“The federal government chose to appeal that ruling”
GFN18	near	“an illegal blockade near the Elsipotog reserve”
GFN36	allegedly	“...half a million dollars that came from federal contribution agreements was allegedly misappropriated”
GN25	Not surprisingly	“Not surprisingly, Idle No More protests have also been cranking up the volume”

Using phrases such as *many believe* and *of many* enables authors to insinuate that their thoughts and opinions are shared by the general public, and thus shared by the reader as well. For example in GFN26, an article regarding lower than expected vaccination rates in Canadian children and the need for a national registry, the author

wrote, “The gut reaction of many involved in immunization policy in Canada is that the figure in the UNICEF report probably does not accurately reflect the immunization status of Canadian children.” Here, the author uses *the gut reaction of many* to suggest that Canadian experts disagree with UNICEF’s findings, insinuating that Canadian readers should disagree with the report, as well. Further, the author uses the word *probably* with regards to the figures that UNICEF has presented regarding immunization rates. The word *probably* allows the author to suggest that the immunization rates reported by UNICEF are inaccurate without having to provide concrete evidence that the report is false. Using this linguistic strategy allows the author to direct the reader, by suggesting that author-opinion is a generally held belief, and by insinuating that UNICEF reports are likely inaccurate. This article’s only relationship to Aboriginal health issues is the suggestion that First Nations healthcare centres would also be participating in the national registry.

Authors may have also used quotations in-text to sway reader-opinion. By strategically inputting quotations, authors may be able to make insinuations without providing a fact-based argument. For example, in CN10, an article about missing and murdered Aboriginal women, Stephen Harper is quoted as saying, “Our government from the very outset has said, as one of its priorities – one of its most important priorities – tackling crime including violence against women and girls.” The quotation asserts commitment to violence against women as a *priority* to be *tackled* however, there are no actions and nothing to indicate intent to act in the quotation. This type of quotation allows the author to insinuate that action has occurred, providing the reader with misguided ideas concerning government initiatives. Another example of the use of quotations was

found in CN31, an article about Theresa Spence's request to meet with Stephen Harper and the Governor General as a condition to ending to her hunger strike. The author wrote, "Prime Minister Stephen Harper to engage in "high-level dialogue" on treaty relationships and comprehensive land claims." Using the quotation *high-level dialogue*, the author insinuates that Harper is ready to take action, providing the reader with the impression that Harper is actively attempting to address Treaty Rights. However, upon closer inspection, the comments are void of an action plan. Using the words *high-level* allows the reader to feel as though something meaningful is taking place, without providing further details.

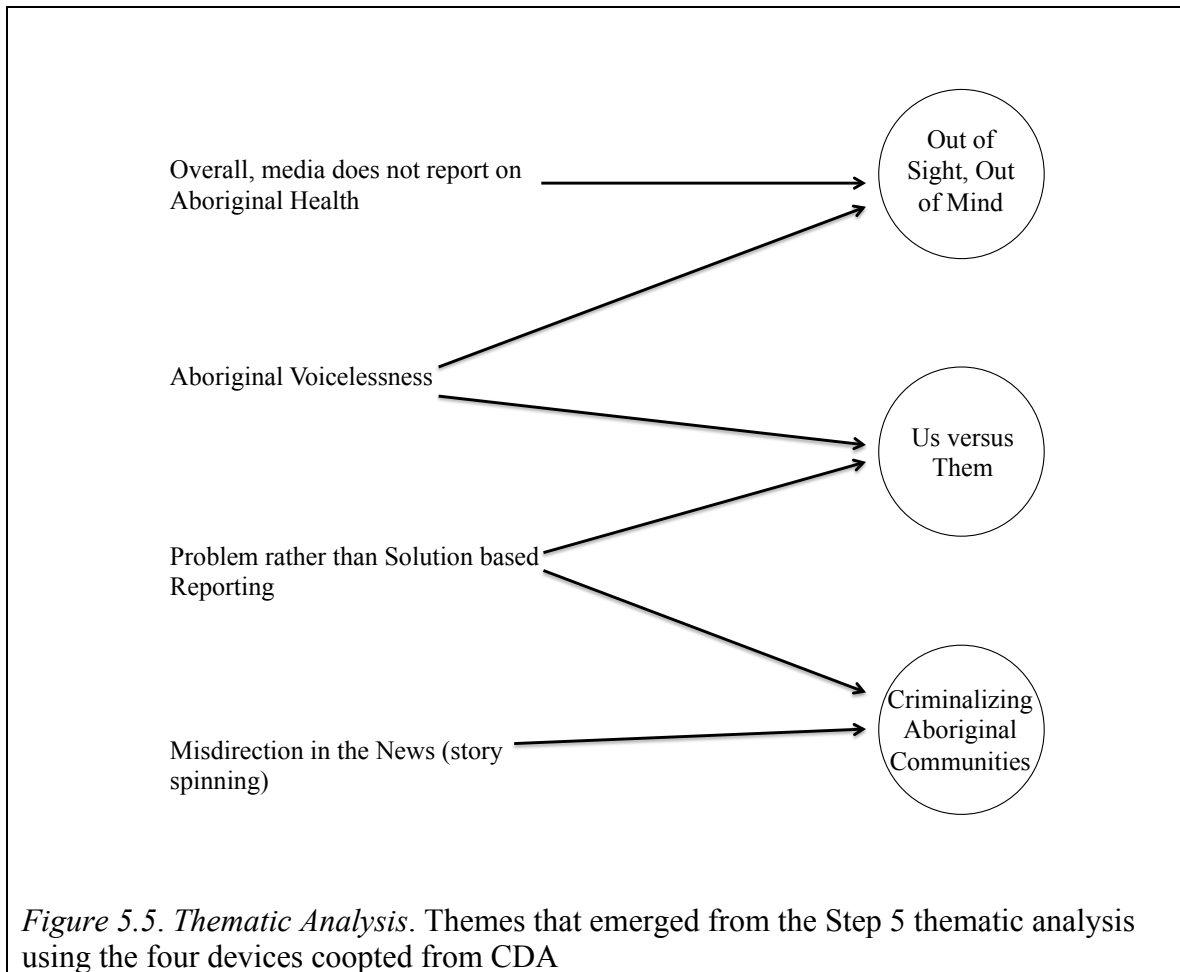
Efforts to sway reader opinion was also seen in NA52, an article about the Idle No More movement and Theresa Spence, wherein the author wrote, "Idle No More founders received word that aboriginal 'leadership' had been 'calling for action' in the name of the campaign." By putting the word *leadership* in quotations the author attempts to suggest that Aboriginal leadership may be questionable. Further, by including *calling for action* in quotations, the author may be attempting to suggest that the Aboriginal leaders have not effectively executed pleas for action. By questioning the authority and the ability of First Nations leaders, authors are able to infer power dynamics evoking specific feelings in readers.

Examining the data using the four CDA devices allowed for themes of negative framing, asserting power imbalances, the creation of psychological distance and planting doubt in readers to emerge from the language used in media articles. Examining the linguistic devices yielded results consistent with the findings of previous studies, which have reported themes of stereotypical negative framing (Harding, 2010; Henry & Tator,

2009; Sloan-Morgan & Castleden, 2014; and distance (Strega et al., 2014). The following section provides a breakdown of the themes found when examining the content of articles during the Step 5 analysis. Exploring the content of media articles allowed for macro level themes to emerge from the data, further aiding to answer the research questions.

Thematic Analysis. The overall findings after combining the components of the Step 4 analysis, the analysis of the Step 5 CDA devices, and the analysis of the content of media articles, Step 5 resulted in four overarching themes. These themes were titled *Out of Sight, Out of Mind; Us versus Them; The Illusion of Action; and Criminalizing Aboriginal Communities*. Figure 5.6 provides an illustration of the themes as they relate to the analysis of language and content.

Out of Sight, Out of Mind. Upon analyzing the 208 articles in Step 5, it became evident that Aboriginal health was not commonly discussed throughout the media. One can surmise that the lack of media coverage on Aboriginal issues could lead to a lack of knowledge in readers. The lack of coverage regarding Aboriginal health allows and encourages the general population the opportunity to remain ignorant to the major health issues that are prevalent throughout Aboriginal communities.



Earlier, when describing the results from Step 4 the analysis revealed that only 3.85% of media articles (8 out of 208) directly related to Aboriginal health and featured an Aboriginal voice. This result indicated that the general public may not be provided with adequate information regarding experiences of health from the perspective of Aboriginal Canadians. The omission of articles featuring an Aboriginal speaker provided the general population with the opportunity to turn a blind eye to issues of health in Aboriginal communities. Essentially the media is limiting the amount of knowledge that is being made available to Canadians. Combining the lack of media coverage on Aboriginal health and the lack of Aboriginal voice the media may be attempting to keep

Aboriginal communities *out of sight* thus allowing the public the opportunity to ignore salient Aboriginal health issues.

Lastly, by using the overlexicalisation *remote* to describe reserves (see Table 5.2) the media may be attempting to create distance between the issues plaguing Aboriginal communities and the general population through the illusion of physical and psychological space. Distance was also created through a media focus on the *Aboriginal problem*, rather than a focus on larger systemic issues that propagate poverty, poor living conditions and drug addiction. By creating the narrative that there are *Aboriginal problems* that do not require federal or provincial intervention, the media is covertly telling readers, *this is not your problem*, giving them permission to turn a blind eye.

Us versus Them. When considering both the lack of Aboriginal voice in the media and the apparent *problematizing* in coverage on Aboriginal issues, a theme of *us versus them* emerged from the analysis. The theme of *us versus them* is supported by the example, “The federal government has sent nearly one million dollars in emergency funding to a northern Ontario reserve it is auditing amid questions over the use of taxpayer dollars, even as the community’s only school remains shuttered” (NA40). It could be argued that the media is attempting to frame a one-sided perspective that places handout-seeking Aboriginal communities against taxpayers creating the *us versus them* effect for the reader. Without the Aboriginal voice to challenge these beliefs, the media can discuss dollars spent and aid provided without considering the needs of Aboriginal communities.

Problem based reporting allows readers to focus solely on issues within Aboriginal communities rather than possible solutions. The effect of problem based

reporting is that the reader may not attribute accountability to agencies or to the public, but rather places accountability on the Aboriginal communities. Common topics seen throughout problem based reporting included, tobacco trafficking, drug use and mismanagement of bands and band-funds. The narrative constructed by the media may lead readers to believe there is an *Aboriginal problem* rather than larger systemic problems that result in cycles of criminal activity, drug abuse and issues with fund-management.

The theme of *us versus them* is again exemplified by the use of lowercase lettering to describe Aboriginal Canadians and uppercase lettering to describe other Canadians. The power differential that may be insinuated through the use of upper and lowercase lettering allows for psychological distance between Aboriginal Canadians and the dominant culture. The distance can be seen, physically, in newsprint and in online articles through intentional placement of proper versus common nouns used to describe groups. Further, using the overlexicalisation *remote*, as described above, also attempts to create a space between the dominant cultural group and Northern Aboriginal communities allowing the discourse of *us versus them* to emerge.

Criminalizing Aboriginal Communities. The theme of criminalizing Aboriginal communities emerged largely through the narrative of misdirection and story spinning. Many articles that described criminal behaviour, substance abuse or mismanagement of funds did not discuss the underlying causes for the accusations, and thus painted a picture for readers that Aboriginal communities are “bootleggers” and “organized crim[inals]” (NN10). By emphasizing the possible misappropriation or misuse of funds for personal gain, the media shapes a narrative of possible criminal activities in band management.

Further evidence of criminalization was seen throughout the Idle No More and Theresa Spence hunger-strike as the media attempted to weave mismanagement of band-funds and personal issues into news coverage, potentially planting doubt in the minds of readers. The first step in weaving this narrative was to discredit both Idle No More and Spence by conflating the issues, to create the illusion of one cause, as seen in CN33. The media then created a narrative surrounding the “scathing audit” (see Table 5.2 for media sources) to suggest doubt in Spence’s ability to manage her government and band-funds. By pairing Idle No More and Spence with the *scathing audit*, the implications of misuse of band funds was applied to both causes, possibly implying criminal undertones throughout the movements. Simultaneously, the media reported on the Idle No More protests (CN33) insinuating that violence could ensue if the Idle No More movement was not stopped. In GN40, the author is quoted as saying, “Mr. Harper is not likely to give in to a hunger strike, which could be interpreted as blackmail,” when referring to the action of Theresa Spence. In the same article, the author later discussed Idle No More protestors as “dozens of supporters disrupt[ing] Boxing Day traffic.” In this example, the reader is encouraged to think of Spence as a criminal and protestors as disrupting the ebb and flow of the general population, demeaning both movements.

Following the media coverage on protest movements and mismanagement of funds, the media then published stories on Spence’s personal life that may have encouraged further doubt and suggestions of criminalization. For example, in NF46, the author framed the accountant for Attawapiskat First Nation as, “Attawapiskat Chief Theresa Spence’s romantic partner, Clayton Kennedy,” and the author of NA47 described Mr. Kennedy as “[Spence’s] lover.” Both articles then published accusations of

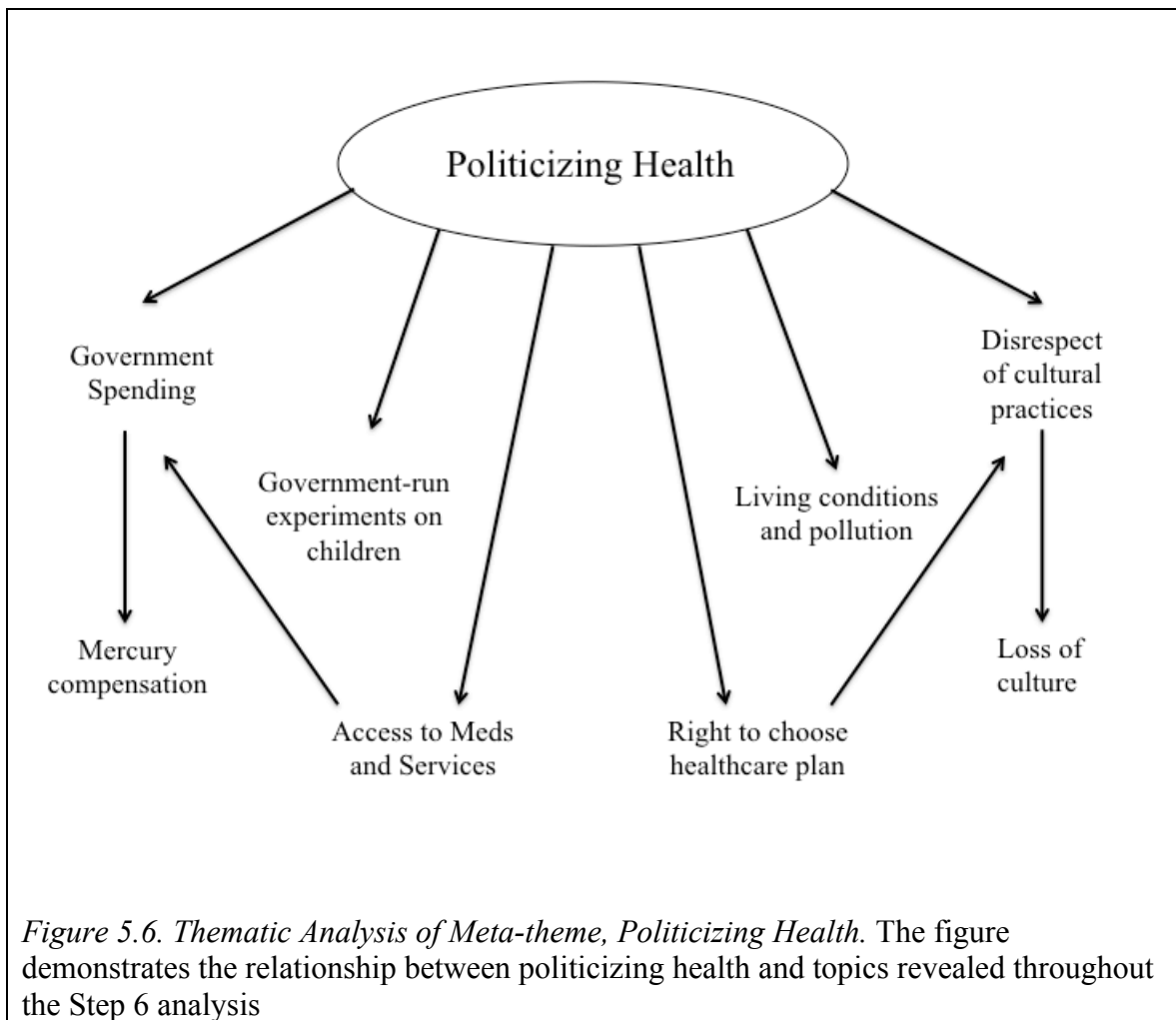
mismanagement of funds and nepotism throughout the band. This kind of defamation may have created a narrative that pushes movements such as Idle No More and Spence's hunger-strike into criminal territory and removes any credibility that readers may have found in the actual cause. This approach also provides misdirection for readers, allowing the public to remain ignorant to the living conditions and treaty violations that birthed both movements.

Throughout the analysis in Step 5, while four predominant themes emerged from the media articles, one important aspect became quite clear: none of the themes that emerged from the data pertained to Aboriginal health. As a result, Step 6 was added to the methodology, which was an analysis of articles that pertained directly to Aboriginal health. The rationale behind Step 6 was that when focussing only on articles that pertained to health, additional themes may present themselves that differed from the themes that emerged when analyzing the 208 articles that met search criteria for Step 5. Further, in order to fully answer the research questions, an analysis of media representations of health was essential.

Step 6

Upon analyzing the 54 articles that pertained directly to Aboriginal health, two additional themes emerged. The themes were titled *Politicizing Health* and *Access*. By comparing only the articles that pertained to health, *access to medical services and care* became a dominant theme that had not emerged throughout the analysis in Step 5. Considering the 208 articles that were analyzed (refer to figure 5.4), general topics included little information on the salient health issues that had been discussed throughout the government reports and academic journals. However, of the 54 articles pertaining

directly to physical health, diabetes appeared in 1.85% of articles, cancer in 9.26%, access to medical care in 14.81%, general health in 24.07%, HIV/AIDS in 1.85%, and nutrition in 3.7% of articles. Further, of the 54 articles pertaining to Aboriginal health, 24.07% of articles concerned mental health, including, 5.56% on general mental health, 11.11% on suicide and 7.41% on substance abuse and drug addiction. The complete analysis for Step 6 was performed identically to the analysis in Step 5, using the four CDA devices. Figure 5.7 and 5.8 provide illustrations to demonstrate the thematic analyses.



Politicizing health. By examining the 54 articles that pertained directly to Aboriginal health, a theme of politicizing health issues emerged early in the data. Referring to Figure 5.7, the data revealed eight themes under the meta-theme. Health was politicized in media articles through an emphasis on politics, policy and spending that most often superseded the topic of health.

Government spending was often discussed with regards to compensation for the First Nation of Grassy Narrows, whose community was and currently is suffering the effects of mercury poisoning. In an article published in the CBC, a spokesperson for the minister of Aboriginal Affairs was quoted as saying, “In total, our Government has contributed more than \$9 million in compensation to Grassy Narrows and Wabaseemoong First Nations affected by mercury contamination, for economic and social development initiatives” (CI02). Throughout the coverage on mercury poisoning, the media attempted to describe government contributions as generous donations to aid the ailing community, rather than a focus on the criminally negligent dumping of mercury into the lakes and health concerns and quality of life in the region.

Government spending was also discussed with regards to drug addiction in Aboriginal communities. In GFN19, an article regarding the dangers of benzodiazepines, the author is quoted as saying, “from 2007 to 2012, the number of First Nations people getting benzos covered by a Health Canada drug plan jumped by about 15 per cent – to more than 70,000 from about 60,800 – an increase slightly higher than overall program growth.” This statement may insinuate to readers that in some cases the government has contributed financially to addictions to prescription drugs. This quote is particularly interesting as it allows the government to advertise its care-taking with regards to

Aboriginal health while simultaneously criminalizing Aboriginal communities by suggesting that government funds are being spent on illicit drug use rather than as medically prescribed for pain. Rather than a focus on treatment programs, or curbing prescription drug use, the article focuses on how Aboriginal Peoples are gaining access to drugs through federal funding, thereby politicizing the issue and reinforcing the need for parent-like care.

A further indication of politicizing Aboriginal health issues was discovered in media articles that describe experiments performed on Aboriginal children in the 1940's. One article posited that:

The Canadian government says it's appalled to hear hungry aboriginal children and adults may have been used as unwitting subjects in nutritional experiments by federal bureaucrats in government run experiments that purposefully withheld vital nutrients from Aboriginal children with the hope of discovering how malnutrition affects the human body (CN25).

The rationale for the experiments was that the children were experiencing the effects of malnutrition prior to government intervention; therefore, the government was merely harvesting scientific information from a situation not of their making. Rather than focussing on creating and implementing programs to aid hungry Aboriginal children or addressing the larger systemic issues that left many Aboriginal children without adequate food sources, the government ran experiments on the children. The media coverage on the experiments published in 2013 included a comment by a spokesperson for the Harper government claiming that "when Prime Minister [Stephen] Harper made a historic apology to former students of Indian Residential Schools in 2008 on behalf of all

Canadians, he recognized that this period had caused great harm and had no place in Canada” (CN25). This statement suggests that Harper’s 2008 *historic* apology can serve as a blanket statement for any wrong-doings, even those discovered after the apology had taken place and including the child experiments described above. Further, the spokesperson clusters *all Canadians* into the statement thereby insinuating that readers share in the accountability, both residential school victims and the victims of child-experiments. The focus of these articles was not on the health and welfare of children but on politicizing the wrong doings to make the government look magnanimous. The media weaves a narrative that provides the conservative government with a platform through which they can gain sympathy from the public and remove accountability from themselves, creating a politically driven focus.

Along with human experiments for scientific and political gain, the health ramifications caused by poor living conditions and pollutants were also politicized through the media. In GFN17, the author discussed rampant pollution on a reserve in Ontario, the author stated that, “a 2006 community survey by Aamjiwnaang’s environment committee cited a number of health issues, including miscarriages, chronic headaches and asthma. Forty per cent of band members surveyed required an inhaler.” However media coverage on the pollution and its health ramifications came second to the funding issues that were discussed throughout the article. The author’s focus was on the lack of funding in the area to study the environmental pollutants that were causing the negative health outcomes within the community. The focus on funding allows the reader to ignore the detrimental health issues rampant on this reserve while keeping the dollar value in focus. Similarly, when singer-songwriter Neil Young spoke out about the rates

of cancer on reserves located around the Fort McMurray oil sands, an author from the National Post wrote the following:

Everybody had really come to listen to Mr. Young, who, dressed in buckskin and a hat, proceeded to spray vitriol and ignorance in all directions. Fort McMurray, he said, stands for disease and pollution. It's all about marketing and big money for big corporations, and the oil's all going to China anyway. Reclamation is impossible; it would be like turning 'the moon into Eden'. (NF16)

While Young's aim was to bring public awareness to the pollution and illness that are effecting the region, the article called into question Young's credibility and advised that the comments "badly served" Aboriginal communities who could gain financially from the oil sands (NF16). By positioning health issues in this way, the media can politicize pollution and health issues, misdirecting readers' focus toward funding and industry rather than on the health of Aboriginal communities. Further, by including a focus on industry and development, the media may be contributing to the stereotypes that Aboriginal communities do not support industry and development, and thus do not support the economic growth of the nation.

The last indication of a potential political agenda in the media stemmed from articles about Makayla Sault, a young girl who had been diagnosed with cancer. While some articles pointed to details about Makayla's condition, the focus of the articles were on Makayla's choice to abandon chemotherapy for traditional Aboriginal healing and healing through Christian prayer. One article outlined issues regarding trust in western medicine, and increasing rates of cancer in Aboriginal communities, however this type of discourse was the minority (NA04). The author stated that:

As recently as the 1980s, Aboriginal communities routinely showed cancer rates that were lower than the Canadian average. A couple generations before that, incidents of cancer were almost non-existent.

But over the last few decades, researchers have found Aboriginal cancer rates to be rising ‘dramatically,’ concluded a 2013 report by the Canadian Partnership Against Cancer.

Not only that, but compared to non-Aboriginal fellow sufferers, Aboriginals had ‘higher mortality rates from preventable cancers,’ it continued. (NA04)

Overall, the right to choose alternatives to western medicine was met with two perspectives. The first discourse was an attack on the Sault family, where media coverage indicated that Makayla should have been taken from her home and forced to finish chemotherapy under the supervision of the Children’s Aid Society (NA07). In a quote, the author stated, “The authorities effectively looked away. As the result, Makayla is both receiving treatment from aboriginal healers at Six Nations, a reserve near her own, and counting on Jesus – the efficacy of both much in doubt except to fervent believers” (NA07), insinuating that the Children’s Aid Society is turning a blind eye toward the safety of Makayla. The second perspective stems from the choice to pursue alternative remedies. In NA06, the author stated that “[Makayla’s] choice seems to be affected by her Christian religious conviction and her belief in the merits of placebo therapies associated with aboriginal spiritualism.” In this quote, as in the quotation above it, the author attempts to sway readers toward the belief that any medical practices outside of western medicine are ineffective. Further, the author blatantly disrespects the power of Aboriginal healing practices and spirituality by referring to them as *placebos*.

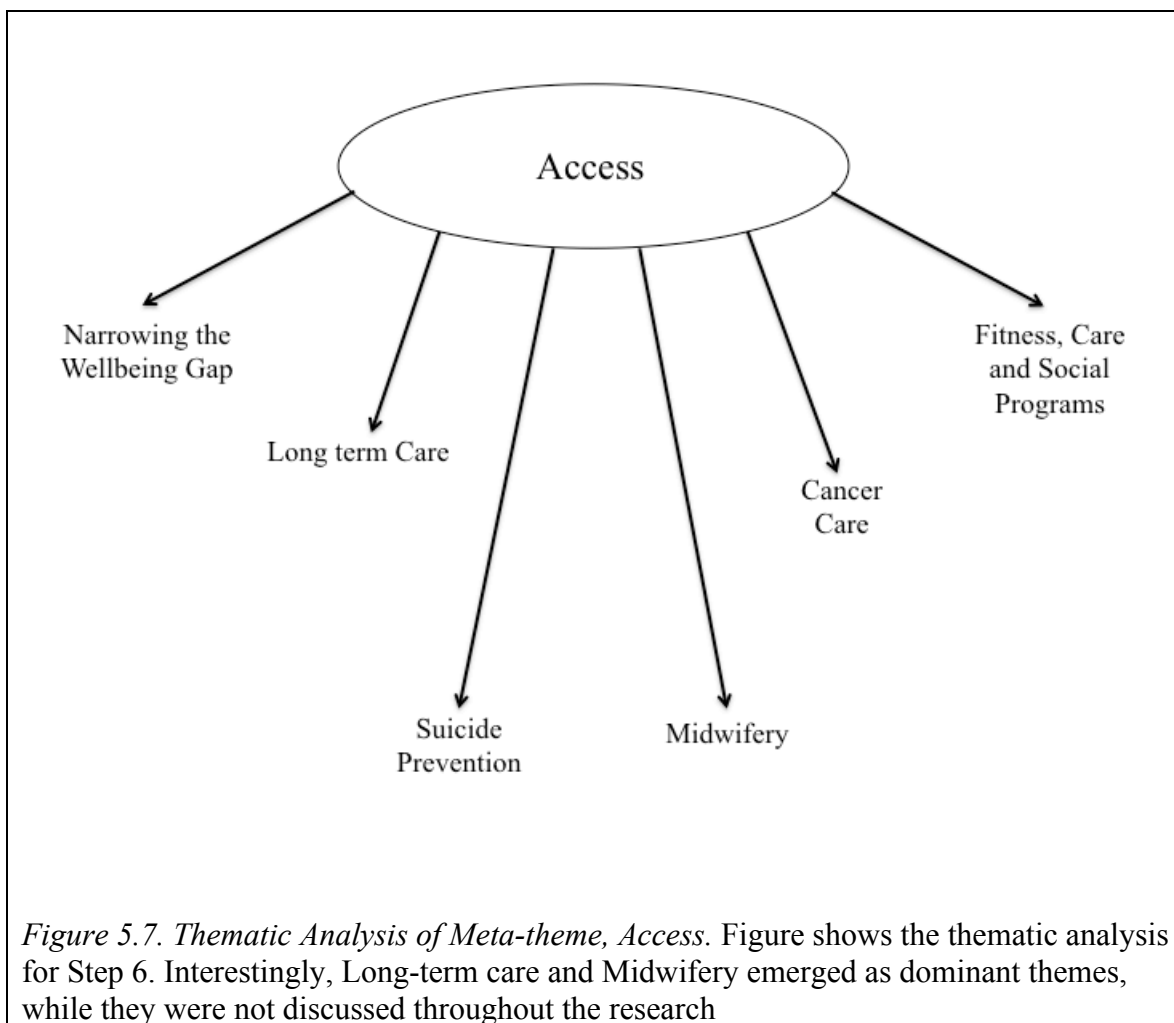
Rather than a focus on Makayla and the prevalence of cancer in Aboriginal communities, the articles focus on inaction from the Children's Aid Society, and attempts to frame Aboriginal healing practices in a negative light. In another example, in NA08 the author suggested that:

Adding to the miasma of doubt is that virtually nothing is known about the traditional therapy — called “Ongwehowe Onongwatri:yo:” — [Makayla's] family has said she's getting from a healer at Six Nations, a reserve near her own.

Details of the treatment are considered protected knowledge, and no research on any of the practices has ever been done. (NA08)

This quotation may imply that the treatment must be ineffective because the media and the public are unaware. This statement may be attempting to establish a power differential in that western medicine is well known and trusted while Aboriginal medicine is mysterious and thus less powerful. By politicizing and criticizing the choices of Aboriginal communities when it comes to health and wellness, the media may be attempting to promote the elimination of Aboriginal healing practices in lieu of western medicine. Further, the media is suggesting to the reader that Aboriginal practitioners are without merit, creating a power imbalance between western practitioners and Aboriginal healers.

Overall, the discourse surrounding health throughout these media articles focused on government funding, government programs, and politics rather than a focus on specific health issues affecting Aboriginal communities. While this theme emerged prolifically throughout many articles pertaining directly to Aboriginal health, access to health services also emerged throughout the Step 6 analysis.



Access. By politicizing health issues the media generated an opportunity to sway readers away from discussing Aboriginal health. However, several topics that emerged from the media articles did discuss some of the issues seen in government reports and academic journals. Referring to Figure 5.8, these themes included fitness and social programs, cancer care, midwifery, long-term care, suicide, and narrowing the wellbeing gap. Each of these themes were grouped within the Meta-theme *Access* owing to their focus on accessing medical care over and above the health issues directly.

A focus on access to fitness and social programming was seen across several publications (CA03, GFN12, GFN14, GN07, GA27 and NA19). Articles relating to

fitness showcased Aboriginal-run programs that sought to bring healthy living to Northern regions of Ontario. Interestingly, these results coincided with Miller's (1997) suggestion that articles featuring an accomplishment were often framed using a positive tone. In CA03, the article discussed a fitness program that utilized fitness and food education to improve the lives of Northern Aboriginal communities who had not had prior access to such programs. The article touched on Aboriginal health concerns including diabetes, heart disease, depression, obesity, high blood pressure, and how the program was helping Aboriginal People improve overall health. The article also featured a strong Aboriginal voice (also a suggestion made by Miller, 1997) using quotations from the program co-ordinator:

'I was expecting one or two [communities to sign up for the program]. I didn't expect all 10 [communities]. It's amazing, in four and a half years, the fitness craze that has hit the north. I love seeing everybody being aware and talking about fitness," Ducharme said.

'There's more things that happen besides fitness. People will privately come up to me and tell me ...they've been dealing with depression but they feel better. People are sleeping better'. (CA03)

Articles with a focus on program access also included increasing the use of paramedicine in Northern regions of the province where healthcare centres may not be accessible to Aboriginal communities. The article, which focussed on healthcare access for the elderly throughout the province, indicated that Northern parts of the province and Aboriginal communities could benefit from travelling paramedics to gain access to services where there are no health centres (GFN12).

While some media articles focussed on the need to increase access to medical care, as seen in the examples above, other articles coincided with previous themes that propagated problem based messages. For example, in GFN14, the author suggested that “The Neskantaga First Nation declared a state of emergency last April over a spate of suicides – and the officials were warned Ottawa could face heightened pressure to provide similar support services to other communities as the area undergoes further development.” This discourse may be indicating that more services are provided to communities where the government and industry can benefit. In NA19, an article that discussed dental care, the author suggested that “[i]n neighbourhoods with a higher number of aboriginal families, the rate of kids getting in-hospital dental surgery was almost nine times higher than that for children in neighbourhoods with a low First Nations or Inuit population.” In this example, the media placed the accountability on Aboriginal communities by withholding details regarding the ability to access regular dental care owing to poverty and location. The author may be attempting to infer that Aboriginal families are using federal funds over and above what is necessary for dental care that non-Aboriginal populations have to pay out of pocket for. This particular article mimics themes previously discussed including criminalizing Aboriginal communities, and generous government donations for healthcare.

Long term care and midwifery appeared as newsworthy health topics in popular media. Midwifery was given attention owing to the traditional and spiritual practices of Aboriginal communities. The articles positioned midwifery as an access point for healthcare in Northern regions where Aboriginal community members may be distrustful of western medical practices. Further, midwifery programs boasted increased access to

care for mothers, which may reduce stress during pregnancy. For example, in GFN11, the author discussed the cultural benefit of midwifery for Aboriginal Canadians, saying,

For the band, Ms. Doran [a midwife] is a sought-after recruit who, it is hoped, will bridge the gap between its community doctors – who do not deliver babies – and obstetricians and midwives in nearby Chilliwack. The band’s program could also serve as a case study for what advocates hope will become routine: relying more on midwives for maternal care, especially in rural and First Nations communities.

(GFN11)

Interestingly, the article did not use the overlexicalisation *remote* First Nations, which may indicate that the author is attempting to bring the communities closer to the readers, increasing the amount to which readers can relate and support midwifery programs in Northern regions.

Access to long-term care for Aboriginal Elders was discussed as a political issue, owing to the minimal population in many Northern regions and lack of funding for long-term care residences. One article compared being taken from Northern communities in older adulthood to the forced relocation that created the residential school system. The author suggested that, “rampant societal racism and the trauma of being torn from families to live in residential schools, where abuse, neglect and substandard healthcare were pervasive within the system” (GA24). The article emphasized a need to keep Elders within the community by providing funding for long term care services in regions where they are currently lacking.

While cancer was previously discussed in the section above with regards to Makayla Sault, and the right to choose medical treatment, some articles emphasized the

need increase access to cancer care and cancer screening in Aboriginal communities. In CI08, “Grand Council Chief Patrick Madahbee, Union of Ontario Indians,” suggested that Aboriginal Peoples should regularly screen for cancer, adding that he has helped to open screening facilities in 20 First Nations communities. While the article does not relay detailed information regarding the increasing pervasiveness of cancer in Aboriginal communities, it does touch on the stigma surrounding cancer, distrust in western healthcare and the need for regular screening and education. The author stated,

The executive director of Mnaamodzawin Health Services, which serves several communities on Manitoulin Island, said understanding history and culture is a key part of effective healthcare.

‘Residential school trauma has prevented people because they are shy and they are not going to go and ask the provider what they need to do,’ Elaine Johnston said. (CI08)

CFN02, again focused on cancer screening in Northern regions of Ontario but did not discuss the increase in cancer rates within Aboriginal communities.

Suicide was also a predominant topic in the discussion on access to medical services in Northern regions of Ontario. One author stated that “Last year, [Neskantaga First Nation] declared a state of emergency after 27 youth attempted and seven youth committed suicide within 12 months. But still the crisis remains. Since then, three more deaths of youth have rocked the community” (CI06). The author also makes reference to “remote Neskantaga First Nation in Northern Ontario” (CI06). Using the overlexicalisation *remote* may allow readers to feel sympathy for the Aboriginal communities, but also may insinuate distance between Northern suicide epidemics and

readers. Distancing readers from the mental health issues may prevent them from feeling fearful that suicide epidemics could befall their own communities, provoking a *that could never happen here* mindset. In GA16, the author suggested that social and physical isolation, along with feeling marginalized as a community is increasing instances of mental illness in Aboriginal First Nations. This rationalization may further reinforce that suicide and mental illness are not rampant issues facing the province or the country, as a whole, but may be specifically an *Aboriginal problem*.

Lastly, *access* was also positioned through media coverage of the wellbeing gap between the general population and Aboriginal Canadians. In CI10, the author stated that “James Anaya, the UN special rapporteur on the rights of indigenous people, painted a grim picture of the conditions facing First Nations, saying Canada is facing a ‘crisis’ when it comes to its treatment of indigenous people.” Anaya was seeking to “to give voice to the concerns” (NA22) of Aboriginal Peoples regarding living conditions, clean water and access to healthcare in order to narrow the wellbeing gap between the general population and Aboriginal groups. In GA20, the author insinuated that Canada is following a “European style marginalization,” with current practices resulting in broadening the wellbeing gap between the general public and Aboriginal groups. The author goes on to state that:

The First Nations’ demographic is quite the opposite – the birth rate is high, and as children finish primary school the exodus to larger cities picks up. The federal government is not worried about that, because each departure from reserve means less for it to worry about. This trend will only grow, and the education, social

service, and health costs are, again taken up by “someone else” – people, provinces, and cities. (GA20)

While the wellbeing gap is a larger macro-level concept rooted in politics and policy, the major concern in both articles was reliable access to services in order to remove “fourth world living conditions” (CI06) from the lives of Aboriginal communities in Canada.

By examining the 54 articles that pertained directly to health, two additional themes emerged from the data, however both *Politicizing Health* and *Access* do not directly reflect the information that was discussed throughout government reports or academic journals. The themes that emerged from the Step 6 analysis further demonstrate a pattern of misdirection when it comes to informing the public on issues relevant to Aboriginal health.

Throughout this section, an overwhelming degree of information has been explored with regards to media representations of Aboriginal health, and the dominant cultural discourse. Themes surrounding stereotypical thinking, politicizing health and access were seen predominantly throughout the analysis. In order to frame this information according to the research questions, the discussion will specifically address how the above information aided in answering each of the questions posed throughout earlier sections of the present study.

Chapter 6: Discussion

This research sought to explore the media representations of Aboriginal health in Ontario as reported by The Globe and Mail, the National Post and CBC.ca. In order to ensure that each research question is addressed using the information gleaned from the thematic analysis, a systematic design was applied to the discussion section wherein each research question is discussed using the themes examined in the results section.

What Aboriginal health issues were being discussed in print media?

Throughout the introduction and literature review portion of the present study, salient health issues were discussed through information gathered from Statistics Canada, the First Nations Regional Health Survey and academic research studies. When compared to non-Aboriginal Canadians, these sources pointed to overrepresentations of type 2 diabetes, obesity, cardiovascular disease, substance abuse, HIV and AIDS, depression and suicide (CMAJ, 2014; Dreger et al., 2013; FNIGC, 2012; Frohlich et al., 2006; Kasper, 2014; Li et al., 2013; Parks et al., 2015) throughout Aboriginal communities in Canada. Many researchers have suggested that explanations for the heightened number of Aboriginal Peoples living in poor health include risky behaviours, such as alcohol and drug use, unsafe living conditions, contaminated water, continued colonialism, oppression, victimization at the hands of the residential school system and historical trauma (Bombay et al., 2014a; CMAJ, 2011, 2014; FNIGC, 2012; Frohlich et al., 2006; Li et al., 2013; Maxwell, 2014; Statistics Canada, 2009; Webster, 2015). Earlier, I proposed that Aboriginal health issues and their associated causes would likely be the focus throughout the search and subsequent thematic analysis of articles gathered during the initial stages of the study. However, this was not the case. As previously stated, many

of the articles gleaned from the initial search did not pertain to Aboriginal issues, but rather created *noise* throughout Steps 2 and 3 of the analysis. The degree of noise throughout media searches would likely create difficulty for lay-people looking to the media for information regarding salient Aboriginal health issues. With less than a quarter of a percent of the articles pertaining to Aboriginal health, it is not likely that interested parties would sift through thousands of articles in order to find such a small number discussing Aboriginal health.

Owing to the number of articles that did not pertain to the subject matter, Step 6 of the study was added to the methodology in order to investigate possible themes relating to media depictions of Aboriginal health. In the previous section, two themes were proposed to have emerged from the data upon examining the 54 articles that pertained to this topic. These themes were titled *Politicizing Health*, and *Access*, referring to access to healthcare services (Refer to Figures 5.7 and 5.8). The theme *Access* revealed that some of the health concerns addressed in the literature review were represented in the media. These topics included fitness, care and social programs, which discussed educating Northern Aboriginal communities on fitness and healthy food choices. Media focus on fitness and nutrition coincide with Statistics Canada and the RHS, as both reports indicated higher degrees of obesity and lower degrees in activity in First Nations communities (FNIGC, 2012; Statistics Canada, 2009). Genuis et al. (2014) used Photovoice to explore eating habits of Aboriginal Children living in Northern communities to show that education on nutrition and food choices was limited for children living on Northern reserves. The newsworthiness of Aboriginal fitness and nutrition may be related to more attention being paid to fitness and wellness across the

country, rather than appearing newsworthy owing to poverty and isolation resulting in a lack of education and lack of healthy affordable food options on reserves.

Reports concerning suicide were also prevalent in the articles regarding Aboriginal health, which coincides with reports from the Canadian Medical Association (CMAJ, 2014). In both the media and in academic articles Aboriginal youth were the focus of the discussion on suicide; however, while the Canadian Medical Association focussed on awareness and causes including historical trauma, the media tended towards story spinning and blaming poor band leadership for the increases in youth suicide.

Cancer, long-term care in Aboriginal communities, and midwifery were also newsworthy health topics covered by the media. Academic research on cancer rates have focussed more on risky behaviours leading to the increasing risk of certain types of cancers. For instance, Parks and colleagues (2015) suggested that rates of lung-cancer were increasing in Aboriginal communities owing to risky behaviour, such as tobacco smoking. The Canadian Aboriginal Aids Network also mentioned increased rates of cervical cancer in at-risk youth, but again the focus of the information was on risky sexual behaviours rather than on increasing rates of cancer. The media, on the other hand, focussed on a need for increased cancer screening facilities and prevention via increased access to medical services. While some media coverage supported the need for service centres, the media coverage also included articles written about Makayla Sault and her fight to choose Aboriginal healing practices over western medicine. Articles written about Makayla Sault were generally political in nature, demeaned Aboriginal healing practices, and insinuated that Aboriginal interventions were nothing more than a placebo. Further, the media coverage on Makayla Sault, while pertaining to cancer and treatment

options, typically framed the story with the intent to criminalize the Sault family for discontinuing western medical practices in favour of traditional Aboriginal healing.

The media also covered increases to midwifery programs in Northern Aboriginal communities. According to media coverage on midwifery, Aboriginal communities can benefit from access to a midwife, including a stronger degree of trust between the practitioner and patient, and increased access to services throughout the pregnancy, leading into motherhood. Support for midwifery has also been studied academically, with researchers focussing on access to services in Northern regions of the county (Kreiner, 2009; Olson & Couchie, 2012; Skye, 2010) and the importance of adopting culturally relevant healing practices (Kreiner, 2009; Olson & Couchie, 2012; Skye, 2010; Van Wagner et al., 2007). Topics included in the media reports celebrate traditions and increasing support of midwifery programs, as seen in the academic research. Both the media and researchers have honed in on the importance of traditional healing and trust building opportunities through midwifery programs.

Long-term care for Elders in Northern Aboriginal communities was also discussed in media coverage on Aboriginal health. A search of academic articles on the topic of long-term care for Elders yielded results that coincide with the media coverage. Habjan, Prince and Kelley (2012) completed focus groups with Aboriginal Elders in Northern Ontario on issues pertaining to care. The researchers suggested that barriers to quality long-term care included an inability to access long-term care facilities, an inability to care for Elders at home owing to children working outside of the home, and an inability to provide safe and stable care. These results coincide with media coverage that suggested funding for long-term care services is limited in Northern regions, making

it difficult for Elders to remain in Northern communities, especially for those who are reliant on medical services in order to survive. The media provided the public with sufficient information regarding an inability to access medical services for aging Aboriginal Peoples. Future academic research should focus on how to empower communities and provide support for Elders who need increasing levels of care throughout the aging process.

In addition to the health topics covered under the theme of *Access*, many of the salient health topics seen in the media focused on politicizing health issues, rather than discussing disparities in health outcomes between Aboriginal and non-Aboriginal groups. Politicizing health issues may allow the media to cover topics important to Aboriginal communities while negatively reinforcing unequal power dynamics. As discussed in the results section, the media covered many Aboriginal health topics including mercury poisoning, living conditions, and pollution on reserves as they pertained to government spending and faulty band-management. Framing the topics in this way, the media is able to shift accountability away from governing bodies that have arguably created or at least perpetuated negative outcomes, and point attention toward Aboriginal band leaders and communities as the source for continuing issues on reserves. This methodology of coverage allows the media to inform the public regarding Aboriginal health issues, while at the same time, building a narrative that enables the public to perpetuate inequality between the dominant cultural group and Aboriginal communities. Stereotypical narratives woven throughout coverage may allow readers to buy into the notion of the *Aboriginal problem* rather than looking at the larger systemic issues that perpetuate negative outcomes.

The topics covered by the media concerning Aboriginal health, loosely coincide with some of the information included in the literature review portion of this study (see figure 5.4 for list of topics related). While some health topics were discussed in the media, it is argued that many of the articles carried an agenda that was not true to informing the public regarding the health discrepancies between the general public and Aboriginal communities, especially in Northern regions of Ontario. Politicizing health issues provided the media with the opportunity to perpetuate and reinforce stereotypical ideas of Aboriginal communities, including seeking government handouts and irresponsible or criminal band-management practices. Aside from the negative, stereotypical framing practices, which may serve to politicize Aboriginal health issues, the main outcome with regards to the general discourse on Aboriginal health is that media articles were not readily accessible using the search algorithm from the present study. Even when attempting to seek out information pertaining to First Nations health, a mere quarter of a percent of articles were on point with the topic. This outcome suggests that there is not currently an ongoing discourse with regards to Aboriginal health, nor is there an ongoing discourse concerning the improvement of medical outcomes for Aboriginal Canadians within the media. Combining the results from the Step 6 analysis with the lack of health coverage included in the media demonstrates a larger message: that Aboriginal Canadians are not as newsworthy as other Canadians. This narrative places Aboriginal Canadians as less important or less powerful within the national discourse. In addition, negative framing creates a relational dynamic where readers are encouraged to see Aboriginal Canadians as less able to manage day to day living, Aboriginal Canadians as infantile and as prone to risky or criminal behaviour.

How were Aboriginal health issues represented in print media?

Of the articles that pertained to Aboriginal health, some provided positive information regarding a need for increasing access to health services, and education regarding fitness and healthy eating practices - especially in Northern communities where access to healthy food choices is limited. In this regard, the media has provided the public with an accurate depiction of the difficulties that Aboriginal communities face when attempting to live a healthy and prosperous lifestyle. This narrative coincides with Miller (1997), who proposed that positive depictions of minority groups in the media centred on accomplishments and positive program implementation that are designed to help communities succeed. That being said, these articles are the minority when looking at all of the articles that pertained directly to Aboriginal health.

In the methodology section, agenda setting theory and framing theory were proposed as larger concepts used by the media to relay specific information to the general public, in order to sway popular opinion. The theme of politicizing health provides an argument for the use of framing and agenda setting in articles pertaining to Aboriginal health. The evidence that emerged through the analysis suggests the construction of the *Aboriginal problem* narrative, which points the focus toward Aboriginal communities by insinuating that risky behaviour and criminal activity are at the heart of larger health issues. Henry and Tator (2009) and Krebs (2011) reported findings similar to the theme of the *Aboriginal problem* discussed above. Krebs (2011) examined discourse in print media compared to talk radio, reporting that the *Aboriginal problem* as a thematic element was present throughout talk radio. Henry and Tator (2009) reported similar results through studies on print media and representations of Aboriginal Canadians,

indicating that the Aboriginal problem was a prolific message throughout print media publications. Combining the results of Henry and Tator (2009), Krebs (2011) and the current study, provides evidence of the *Aboriginal problem* as a discourse being reported throughout multiple media sources and over time, suggesting that this may be a pervasive issue. When the media frames Aboriginal health concerns as part of the *Aboriginal problem*, as seen in the present study through articles that focused on government handouts for victims of mercury poisoning, the narrative that is relayed to the public suggests that health concerns should be viewed as an issue belonging only to Aboriginal communities, rather than the broader Canadian community or governing bodies. The narrative also boasts that sufficient government funding has been provided to communities in need, by insinuating that Aboriginal communities are seeking funding over and above what is necessary for ensuring their success. This narrative completes two tasks for readers. First, it suggests an *us versus them* mentality wherein readers can begin to see Aboriginal communities as a problem to the overall economic safety of the nation. Secondly, it criminalizes Aboriginal communities by suggesting that they are money-hungry vagrants, unwilling to work for economic success. Reinforcing the stereotype portrayed in the latter point is of particular importance as it is in direct violation of the value or ideology that as North Americans we work hard to provide for and support our families and communities.

In addition to framing stories on Aboriginal health using government funding and the propagation of stereotypes, the media used framing techniques that were disrespectful of Aboriginal culture and health practices. This narrative allowed the media to insinuate that Aboriginal communities should assimilate into the dominant culture, rather than

encouraging an integration of Aboriginal culture and tradition into western medical practices. de Leeuw et al. (2010) suggested similar findings upon investigating depictions of child welfare issues in Aboriginal communities in the media. The researchers reported a narrative of *the state knows best* and indicated that interventions in child welfare cases in Aboriginal communities often included the enforcement of euro-centric hegemonic values. In the present study, media articles pertaining to the case of Makayla Sault, a young Aboriginal girl who had decided to treat her cancer with traditional Aboriginal healing rather than western medicine, depicted Aboriginal treatment as unknown and mysterious - one article going as far as calling it a placebo. The degree of disrespect and ignorance provided by the media suggests that Aboriginal health practices should be discluded from accepted means through which Canadians can seek treatment. Further, in Makayla Sault's case, the media suggested that the girl should be removed from her home and forced to comply with more widely accepted, western medical treatments for cancer. The way in which the media chose to report on this topic suggests that it is attempting to sway readers away from acknowledging the validity of Aboriginal healing practices, pegging Aboriginal healing against western medicine. In this regards, the narrative may be perpetuating euro-centric hegemonic values of trust in the biomedical model and an *us versus them* mentality by suggesting that if Aboriginal communities do not comply with western standards they may be penalized (via the removal of their children by the Children's Aid). According to the media sources, the Sault's punishment for non-compliance should have been the removal of Makayla Sault from her family and her community, and involuntary treatment for her cancer. The media may have positioned the Sault case in this manner in order to increase support for western medical

practices and dissuade the general public from supporting alternative methods for treating medical issues. This position also robs power from Aboriginal Peoples by insinuating that Aboriginal communities are unable to provide adequate care for their children, which further infantilizes the group.

Lastly, the way in which the media covered suicide in Aboriginal communities also demonstrated a pattern of agenda setting. Many of the articles that covered increases in suicide and suicide attempts in Aboriginal communities adequately outlined the desperate and dire circumstances in some Northern regions, however beneath the surface the media wove a narrative that suggested band leadership and fund mismanagement were at the heart of the suicide epidemic. Rather than discussing the systemic or macro level issues that play a part in the overwhelming number of youth suicides in Northern Ontario, the media shifted accountability, suggesting that disorganized and criminal leadership are at the centre of youth suicide. Framing the cause for suicide in this way allowed the media to complete two tasks: first, it allowed a platform to further discuss the stereotype of mismanagement of band funds, and secondly, it shifted reader-focus away from possible causes for the suicides, such as continued colonization, oppression and historical trauma (see discussion on Frohlich et al., 2006 and Bombay et al., 2014a). The prevalence of messages of mismanagement speaks to what Krebs (2011) referred to as discourse that robs Aboriginal communities of agency. Previous media studies have also outlined the focus on mismanagement in Aboriginal communities (de Leeuw et al., 2011; Harding, 2005; Hoffman-Goetz & Friedman, 2005; Sloan-Morgan & Castleden, 2014), culminating in what Harding (2006) described as the infantilization of Aboriginal Canadians. The messages of mismanagement described throughout media publications

serve to reinforce the power imbalance between Aboriginal Canadians and other Canadians, creating what Krebs (2011) described as relational dynamic wherein European Canadians feel they must help to facilitate success in lower, or less powerful communities. The media may be suggesting that without implementing euro-centric hegemonic values upon less powerful communities, these communities will be unable to become agentic, well-established and thriving societies.

Taken together, the media may be using Aboriginal health issues as a caveat through which it can perpetuate stereotypical ideologies such as handout seeking, and band mismanagement, misdirecting readers away from disparities in negative health outcomes between Aboriginal and non-Aboriginal Peoples. Further, the media may have used coverage on Aboriginal health to dissuade readers from supporting alternatives to western medicine, and reinforce euro-centric hegemonic values. Rather than focussing on larger systemic issues that may lend themselves to an increase in discussions regarding Aboriginal health concerns, the media shifts accountability toward Aboriginal communities. This narrative allows the media to insinuate that there is an *Aboriginal problem* at the heart of health concerns, creating a narrative of *us versus them*.

Considering the bidirectionality of Bronfenbrenner's ecological systems theory, owing to minimal access to healthcare, politicizing health issues, and media-driven claims that disparities are a result of meso-systems such as band leadership, hardships in larger systems may affect individual health outcomes. Further, micro-level issues such as individual health may inadvertently support stereotypical claims for outsiders looking in at Aboriginal communities. Without consideration for the political agendas, power imbalances, and historical trauma, readers may be exposed only to what allows for the

perpetuation of stereotypical thinking, rather than the larger picture, which shows health disparities as part of Aboriginal communities. In order for readers to better understand these complexities, the media must begin to cast a much larger net when it comes to covering health topics and the reasons for health disparities.

Does print media propagate power imbalances between the general population and Aboriginal cultures?

Throughout this discussion thus far, the research questions have not lent themselves to discussing some of the larger themes that emerged from the data in Step 5. This research question however, provides an opportunity to explore how some of the themes that emerged from the Step 5 analysis contribute to the overall findings. The theme *us versus them* has been a point of reference throughout this discussion, thus will be explored first as a contributor to the potential power imbalance between Aboriginal communities and the general population. Creating a sense of *us*, the general public, versus *them*, the Aboriginal Peoples, provides the media with a platform through which they can set up a power dynamic throughout news coverage, potentially swaying the reader toward making specific long-lasting inferences about Aboriginal communities.

Through structural oppositions, the media used upper and lowercase lettering, or proper and common nouns, to show the reader which subjects were more or less powerful, insinuating an *us versus them* mentality for readers. The construction of the subordinate *aboriginal* was integral in creating a power imbalance wherein the dominant cultural group, or the *Canadian* population, was depicted as the power figure and the minority group, or *aboriginal* people, were seen as less powerful. Media studies on the effects of labelling have suggested that externally imposed labels can be adopted as part

of ones identity (Retzlaffe, 2005). Retzlaffe (2005) suggested that the use of lowercase lettering in the media may insinuate that Aboriginal Canadians are worth *less than* while other Canadians are worth *more than*. This power differential may then be transmitted onto the Aboriginal community, potentially creating identities believed to be worth less than the non-Aboriginal Canadians. Not only does the distinction between proper and common nouns resonate with readers, but according to Retzlaffe, it may also impact identity formation in Aboriginal Canadians. Harding (2005) suggested that the media uses manifest and latent content throughout articles in order to sway reader-opinion. Harding described manifest content as physically visible to readers, such as the use of upper or lower case lettering to differentiate groups. Latent content was described as symbolic or stereotypical content that appears throughout the media that serves to sway reader-opinion. Combining these types of writing, the media may be able to include negative framing that demeans Aboriginal groups without using overt racism.

The theme of *us versus them* also emerged from the media discourse, creating psychological distance between Aboriginal communities and the general public. Essentially, the media used semiotic techniques, such as the word *remote*, to insinuate distance between the reader and Aboriginal communities. Discourse that insinuates distance allows the reader to feel as though Aboriginal communities are different, less powerful, or somehow set apart from the general Canadian population. The lack of Aboriginal voice in media articles may also create psychological distance between the general population and Aboriginal Canadians, as readers are not given an opportunity to hear about struggles or successes from the Aboriginal perspective. Psychological distance may allow the media to cover hard-to-swallow information, such as suicide in Northern

regions, without provoking fear in readers, but may also provoke fairy tale-like feelings in readers, allowing readers to distance themselves emotionally from the hardships, poverty, and living conditions in the North. Essentially, the media may be encouraging readers to ignore third world living conditions, while at the same time promoting stereotypical ideologies that support euro-centric hegemonic values. Readers are thereby provided with the opportunity to see themselves as different and more powerful than Aboriginal Canadians, solidifying the *us versus them* dynamic seen throughout media articles.

Coverage on Theresa Spence and the Idle No More movement also depicted power imbalances through a series of narrative that demeaned the movements. Coverage of the Idle No More movement outlined possible violence at the hand of Aboriginal protestors. In this case, the media may be attempting to stimulate a sense of fear that may lead some readers to believe Aboriginal Peoples are against maintaining a civilized and peaceful order. The concept of the *uncivilized Aboriginal* is supported by Harding (2006), as he argued that Aboriginal communities are often depicted in the media as uncivilized or savage. Wilkes et al. (2010) also found that the media framed Aboriginal Canadians as violent, disruptive and criminal in a study that examined coverage of collective action. Framing Aboriginal communities in this light allows the general public to think of themselves as upstanding contributors to society, and Aboriginal Peoples as unpredictable, possibly violent members that should be managed in order to maintain order. The dynamic that is portrayed to readers supports a further power imbalance between the general public and Aboriginal Canadians.

Coverage regarding Theresa Spence also contributed to the overall power

imbalance seen in the media as many of the articles propagated the stereotypical ideology of band mismanagement and possible criminal behaviour through misappropriation of band funds. Throughout coverage on Spence's hunger strike, the media attempted to weave a narrative that accused Spence and the Attawapiskat leadership of criminal activity, eventually leading the First Nation into a housing crisis. Through coverage that outlined generous government contributions, the media suggested that the government had provided Attawapiskat First Nation with sufficient means to build lasting, safe housing for its members, carefully including the taxpayer to ensure Canadians were pitted against the First Nations Chief. Not only do these comments bolster support for the government, they also contribute to the notion of the *Aboriginal problem*, in that readers can attribute unsafe housing conditions to greedy band leadership, who pay themselves first and look after their community last. Previous media studies on Aboriginal news coverage have also pointed to mismanagement as a topic through which the media develops power imbalances. Harding (2010) suggested that the media used mismanagement of band funds to insinuate that Aboriginal communities cannot successfully self-govern or govern child welfare services on First Nations reserves. Sloan-Morgan and Castleden (2014) reported that the media used mismanagement of funds to exemplify issues in self-governance relevant to reader-support for Treaty rights and Krebs (2011) suggested that the media propagates band mismanagement in order to provide a platform through which other Canadians feel more powerful than their Aboriginal counterparts.

The media also established a power imbalance between the general population and Aboriginal communities through the propagation of stereotypical thinking. The

propagation of stereotypical messages and misdirection may have been used to foster negative framing of Aboriginal Canadians, in an effort to reinforce positions of power. For example, criminalizing Aboriginal communities through coverage on organized crime, and misappropriation of funds provides readers with the opportunity to sit in a pious position over Aboriginal Peoples living on reserves. Articles regarding tobacco sales on reserves rarely noted that it is legal to manufacture tobacco products on Aboriginal reserves, but rather grouped the sale of tobacco products with illegal drug sales, firearm smuggling and human trafficking. Readers are provided with a narrative that suggests criminal activity is normative on reserves, removing power from Aboriginal communities and increasing feelings of power in readers. Media studies on missing and murdered Aboriginal women have also reported themes of criminalizing Aboriginal women through the accusation that risky lifestyle choices, including prostitution and drug use, resulting in wrongdoings (Strega et al., 2014). Jiwani and Young (2006) suggested that the media produces narratives that position deviant Aboriginal women as hyper-visible in the news, while Aboriginal victims of crime are invisible or un-newsworthy. The hyper visibility of deviant, criminal activity provides a backdrop for stereotypical thinking wherein all Aboriginal Peoples are criminals, thus the group may be seen as less powerful or worthy when compared to non-Aboriginal readers.

Lastly, power differences may have been established through the creation of the *Aboriginal problem*. By the *Aboriginal problem* I mean that readers may have been encouraged to conclude that issues in Aboriginal communities were the fault of poor management, criminal behaviour, inability to self-govern, and drug and alcohol use rather than the fault of larger systemic issues, government agencies, colonization, oppression or

historical trauma (as seen in Harding, 2006 and Krebs, 2011). The *Aboriginal problem* was constructed via articles that point to band-management and misappropriation of funds as the reason for poor living conditions and poverty, despite generous government contributions. Providing readers with the impression that Aboriginal communities are given sufficient resources, readers can surmise that it is the community and not the government or other agencies that are failing. Harding (2005) suggested that the media propagates the narrative that Aboriginal communities are unable to self-govern, encouraging readers to infantilize Aboriginal communities. Further, through the creation of psychological distance readers may hold fairy-tale or mythological ideas regarding life on Aboriginal reserves. These two points, when combined, may allow readers to hold themselves above Aboriginal leadership, and Aboriginal community members, seeing them as lacking the necessary skills to maintain a successful and healthy lifestyle.

Inequality and the propagation of power differences was also insinuated through articles that suggest crime, and band mismanagement are the cause of increased suicide in Aboriginal communities, than has been seen in the past. By suggesting that increased youth suicide is a result of poor management, the media has constructed a narrative that suggests Aboriginal adults do not have the capacity to adequately care for youth in the community. The notion of inadequate care was also upheld by Harding (2006), when he suggested that the media infantilized Aboriginal communities, depicting them as child-like and unable to care for themselves. By infantilizing Aboriginal communities, and specifically Aboriginal leadership, the media may be constructing a narrative that encourages readers to take a superordinate perspective when thinking about Aboriginal Canadians.

Overall, these findings indicate that the media does propagate a power imbalance between the general public and Aboriginal communities. By creating an *us versus them* mentality in readers, the media is encouraging the general population to set Aboriginal communities outside of the general public. Further, by criminalizing and infantilizing Aboriginal groups, the media is placing them in a position of having less power. The propagation of power differences allows the public to remain ignorant to the fourth world living conditions that some Aboriginal communities find themselves in. Further, it may allow some readers to justify poor living conditions, poverty and ill-treatment as the media constructed narrative is one that suggests Aboriginal communities should be accountable for negative outcomes. Future research into media contributions to power differences between Aboriginal communities and the general population should include an investigation of the motivation behind the power differences. Understanding why the media chooses to support unhealthy power dynamics may be an integral part in changing attitudes toward Aboriginal groups. Ultimately, the media appears to be propagating euro-centric hegemonic ideologies that keep Aboriginal communities in a position of having less power, while the dominant cultural group remains pedestalled.

Conclusion and Implementation

Owing to the vast amount of information that has been presented throughout this study, it is important to outline major take home messages and possible trajectories for future research concerning media depictions of Aboriginal health. First, the difficulty in locating news coverage regarding Aboriginal health should be held as the single most important message stemming from the research. This is of great concern, as Aboriginal Canadians have experienced negative health outcomes at a rate over and above other

Canadians (Dreger et al., 2013, Kasper, 2014; Li et al., 2013). As such, it is my hope that this research can be used to fuel conversations regarding Aboriginal health throughout the popular media, academia and in the general public. Secondly, the media has propagated power imbalances that may create further difficulty for struggling Aboriginal communities. By shifting accountability onto Aboriginal communities, the media is able to frame the *Aboriginal problem* as an issue belonging to Aboriginal Peoples, rather than focussing on how to mend communities in a healthy way, encouraging all Canadians to rally together in order to create change.

Where the media is concerned, changing the way in which language is used in order to promote inclusivity is integral to removing barriers and promoting equality. The first step in changing the way the general public discusses Aboriginal issues is to change the way in which the media discusses Aboriginal issues (see Van Dijk, 1995 and Milke, 1999). This includes shifting the focus away from Aboriginal communities and focussing on continued colonization, oppression and historical trauma. This point is supported by a report published by the JHR (2013), which sought to investigate the language used in media coverage on Aboriginal Canadians. The document revealed themes similar to some of the themes presented in this study, including problem oriented reporting and stereotypical discourse, however the language used throughout the report reflects the same negative framing techniques seen throughout the articles in the current study. In order to make strides in the right direction, the media must change the language used to report on issues relevant to Aboriginal Canadians. One of my overarching goals is to appeal to media outlets, to provide information on the degree to which the media influences popular opinion. Stewart and colleagues (2012) conducted a pilot study with

journalists to increase sensitivity in language use. The researchers reported that journalists who underwent training were able to use sensitivity when covering issues relevant to Aboriginal Australians. Unfortunately, the researchers could not conclude that the effects of the training would continue after the study or into the future. Regular sensitivity and language training should be provided to journalists in order to ensure that stereotypical ideologies and euro-centric hegemonic values no longer appear in media coverage.

While the present study provides a foundation for media influence concerning Aboriginal issues, it focussed only on Aboriginal health in Ontario. Future research should investigate whether similar themes emerge from media publications in other provinces and territories across Canada, and concerning additional topics such as employment, education, Aboriginal spirituality and traditions, mental health, family relationships, housing, welfare and poverty. Further, a broader investigation into the possible motives for the propagation of power differences is necessary in order to better understand this phenomenon.

While the analysis of media articles concerning Aboriginal health provided fruitful results, there were limitations to the design of the study. My limited experience with CDA proved to create a difficult and slow beginning to data gathering process, specifically when trying to efficiently implement the design of the study. In the initial stages, many of the searches and the Step 4 analysis were performed inefficiently resulting in extra time being taken to ensure that the review of articles was performed adequately. In addition to familiarizing myself with techniques used in CDA, the search engines used to gather data were not streamlined. The CBC website, in particular

provided inefficient search options, and disorganized results. As such, more time had to be spent sifting through results from the CBC website, over and above the time that was required to perform searches on The Globe and Mail and the National Post websites.

The initial model, built for this study, included two additional Steps, the first, in which I had wanted to conduct focus groups with community members in order to explore whether the language and messages contained in the media is reflected in the general population. The second step would have been to interview Aboriginal community members regarding the salient themes found throughout the analysis of media articles. However, owing to time constraints, neither could be included in the study. Future studies, using this methodology should include an Aboriginal voice in order to better understand if themes derived from the media articles resonated with the Aboriginal community. Lastly, future studies on the topic of media influence should include focus groups with a community sample in order to assess whether the messages reportedly found in the media influences the general population. While amending the methodology to include these aspects would have created the potential for a richer and possibly a more robust set of results, it is believed that the results gleaned from this study are an accurate indication of the media influence concerning perceptions of Aboriginal health in Ontario.

The major take conclusion stemming from the current study is that there is currently it was difficult to find coverage on Aboriginal health issues, which may indicate that Aboriginal health issues are not considered newsworthy. Overall, negative framing was used to describe Aboriginal Canadians across several topics, as discussed throughout the results and discussion sections. In order to change stereotypical and negative framing practices in the media, journalists and the news community need to adopt inclusive

language, which may, in turn, change stereotypical thinking in the general population. In order to decrease the number of negative health outcomes in Aboriginal communities, a discourse must begin to bring these issues to the attention of the wider Canadian population, including coverage on continued colonization, discrimination and historical trauma.

References

- Alvesson, M., & Kärreman, D. (2000). Varieties of discourse: On the study of organizations through discourse analysis. *Human Relations, 53*, 1125-1149.
- Berger, P. L., & Luckmann, T. (1966). *The social construction of reality: A treatise in the sociology of knowledge*. London, England: Penguin Books
- Big-Canoe, K., & Richmond, C. M. A., (2014). Anishinabe youth perceptions about community health: Toward environmental repossession. *Health and Place, 26*, 127-135.
- Bombay, A., Matheson, K., & Anisman, H. (2011). The impact of stressors on second generation Indian residential school survivors. *Transcultural Psychiatry, 48*, 367-391.
- Bombay, A., Matheson, K., & Anisman, H. (2014a). Appraisals of discriminatory events among offspring of Indian residential school survivors: The influence of identity centrality and past perceptions of discrimination. *Cultural Diversity and Ethnic Minority Psychology, 20*, 75-86.
- Bombay, A., Matheson, K., & Anisman, H. (2014b). The intergenerational effects of Indian residential schools: Implications of the concept of historical trauma. *Transcultural Psychiatry, 51*, 320-338.
- Bowen, A., Duncan, V., Peacock, S., Bowen, R., Schwartz, L., Campbell, D., & Muhajarine, N. (2014). Mood and anxiety problems in perinatal Indigenous women in Australia, New Zealand, Canada, and the United States: A critical review of the literature. *Transcultural Psychiatry, 51*, 93-111.

- Brewer, A. (2nd Ed.). (1990). *Marxist theories of imperialism: A critical survey*. London: Routledge.
- Bronfenbrenner, U. (1989). Ecological systems theory. In R. Vasta (Ed.), *Annals of child development, Vol. 6* (pp. 187-249). Greenwich, CT: JAI Press.
- Bronfenbrenner, U. (1994). Ecological models of human development. In T. Husen & T. N. Postlethwaite (Eds.), *International Encyclopedia of Education* (2nd Ed., Vol. 3, pp. 1643-1647). Oxford, England: Pergamon Press.
- Burr, V. (2015). *Social constructionism* (3rd Ed.) New York, NY: Routledge.
- Cain, R., Jackson, R., Prentice, T., Collins, E., Mill, J., & Barlow, K. (2013). The experience of HIV diagnosis among Aboriginal people living with HIV/AIDS and depression. *Qualitative Health Research, 23*, 815-824.
- Canadian Aboriginal AIDS Network. (2015). *Aboriginal HIV and AIDS Statistics*. Retrieved from <http://www.caan.ca/regional-fact-sheets/>
- Canadian Diabetes Association. (2015). *Diabetes in Canada*, Retrieved from <https://www.diabetes.ca/getmedia/513a0f6c-b1c9-4e56-a77c-6a492bf7350f/diabetes-charter-backgrounder-national-english.pdf.aspx>
- Canadian Medical Association. (2011). *High rates of injection drug use in urban Aboriginal youth signal need for prevention programs*. Retrieved from http://www.cmaj.ca/site/misc/pr/13june11_pr.xhtml
- Canadian Medical Association. (February 18, 2014). Children as young as six sniffing gas in Pikangikan. *Canadian Medical Association Journal, 186*, 171-172.
- Cimons, M. (2008). *The medicalization of menopause: Framing media messages in the twentieth century* (Doctoral dissertation, University of Maryland, College Park).

- Retrieved from <http://drum.lib.umd.edu/bitstream/handle/1903/8352/umi-umd-5616.pdf;jsessionid=9904AFC0AA40AA48574B79839B824B1E?sequence=1>
- Chandler, M. J., & Lalonde, C. (1998). Cultural continuity as a hedge against suicide in Canada's First Nations. *Transcultural Psychology, 35*, 191-219
- Clark, B. (2014). Framing Canada's Aboriginal peoples: A comparative analysis of Indigenous and mainstream television news. *The Canadian Journal of Native Studies, 34*, 41-64.
- Clarke, J. N., Friedman, D. B., & Hoffman-Goetz, L. (2005). Canadian Aboriginal people's experiences with HIV/AIDS as portrayed in selected English language Aboriginal media. *Social Science & Medicine, 60*, 2169-2180.
- Corrigall-Brown, C., & Wilkes, R. (2012). Picturing protests: The visual framing of collective action of First Nations in Canada. *American Behavioural Scientist, 56*, 223-243.
- Crotty, M. (1998). *The foundations of social research: Meaning and perspective in the research process*. Australia: Sage Publications Inc.
- Culpeper, J. & Haugh, M. (2014). *Pragmatics and the English language*. London: Palgrave Macmillan.
- Currie, C. L., Wild, C., Schopflocher, D. P., Laing, L., & Veugelers, P. (2013). Illicit and prescription drug problems among urban Aboriginal adults in Canada: The role of traditional culture in protection and resilience. *Social Science and Medicine, 88*, 1-9.
- Davey, C. J., McShane, K. E., Pulver, A., McPherson, C., Firestone, M., & Ontario Federation of Indian Friendship Centres. (2014). A realistic evaluation of a

community-based addictions program for urban Aboriginal people. *Alcoholism Treatment Quarterly*, 32, 33-57

Deignan, B. (2013). *Health and risk communication in Ontario newspapers: The case of wind turbines* (Dissertation). Retrieved from <https://uwspace.uwaterloo.ca/handle/10012/7690>

De Leeuw, S., Greenwood, M., & Cameron, E. (2010). Deviant constructions: How governments preserve colonial narratives of addictions and poor mental health to intervene into the lives of Indigenous children and families in Canada. *International Journal of Mental Health Addiction*, 8, 282-295.

Dreger, L. C., Mackenzie, C., & McLeod, B. (2015). Accepting and suitability of mindfulness training for diabetes management in an Indigenous community. *Mindfulness*, 6, 885-898. doi 10.1007/s12671-013-0257-z

Druckman, J. N. (2001). The implications of framing effects for citizen competence. *Political Behaviour*, 23, 225-256.

Entman, R. M. (1989). How the media affect what people think: A information processing approach. *The Journal of Politics*, 51, 347-370.

Fairclough, N. and Wodak, R. (1997) 'Critical discourse analysis.' In T. A. van Dijk (ed.), *Discourse Studies: A Multidisciplinary Introduction*, Vol. 2. London: Sage.

First Nations information Governance Centre (FNIGC) (2012). First Nations Regional Health Survey (RHS) 2008/10: National report on adults, youth and children living in First Nations communities. Ottawa: FNIGC.

Frohlich, K. L., Ross, N., & Richmond, C. (2006). Health disparities in Canada today: Some evidence and a theoretical framework. *Health Policy*, 79, 132-143

- Genuis, S. K., Willows, N., First Nation, A., & Jardine, C. (2014). Through the lens of our cameras: children's lived experience with food security in a Canadian Indigenous community. *Child: Care, Health and Development*, 41, 600-610
- Gergen, K. J. (2001). From identity to relational politics. In Gergen, K., *Social construction in context* (pp. 170-184). London: Sage Publications Ltd.
- Gilchrist, K. (2010). Exploring differences in Canadian local press coverage of missing/murdered Aboriginal and White women. *Feminist Media Studies*, 10, 373-390.
- Gilmore, S., (2015, January 22). Canada's race problem? It's even worse than America's. *McLean's*. Retrieved from <http://www.macleans.ca/news/canada/out-of-sight-out-of-mind-2/>
- Goffman, E. (1974). *Frame Analysis: An Essay on the Organization of Experience*. Boston: Northwestern University Press.
- Government of Canada Department of Justice. (2015). Legistics First Nation(s) – Aboriginals. Retrieved from <http://www.justice.gc.ca/eng/rp-pr/csj-sjc/legis-redact/legistics/p1p12.html>
- Green, B. L. (2010). Applying interdisciplinary theory in the care of Aboriginal women's mental health. *Journal of Psychiatric and Mental Health Nursing*, 17, 797-803.
- Harding, R. (2005). The media, Aboriginal people and common sense. *The Canadian Journal of Research Studies*, 25, 311-335.
- Harding, R. (2006). Historical representations of Aboriginal people in the Canadian news media. *Discourse and Society*, 17, 205-235

- Harding, R. (2010). The demonization of Aboriginal child welfare authorities in the news. *Canadian Journal of Communications*, 35, 85-108.
- Hartley, J. E. K., Wight, D., & Hunt, K. (2014). Presuming the influence of the media: Teenagers' constructions of gender identity through sexual/romantic relationships and alcohol consumption. *Sociology of Health and Illness*, 36(5), 772–786.
doi:10.1111/1467-9566.12107
- Health Canada. (2015). *Mental health and wellness*. Retrieved from <http://www.hc-sc.gc.ca/fniah-spnia/promotion/mental/index-eng.php> (accessed September 17, 2015)
- Henry, F., & Tator, C. (2009). Contributions and challenges of addressing discursive racism in the Canadian media. *Canadian Journal of Communications*, 34, 711-713.
- Hesse-Biber, S. N., & Leavy, P. (2011). *The practice of qualitative research*. Thousand Oaks, California: Sage Publications Inc.
- Hobjan, S., Prince, H., & Kelley, M. L. (2012). Caring for Elders in First Nations communities: Social systems perspective on barriers and challenges. *Canadian Journal on Aging*, 31, 209-222.
- Hoffman-Goetz, L., Friedman, D. B., & Clarke, J. N. (2005). HIV/AIDS risk factors as portrayed in mass media targeting First Nations, Metis and Inuit peoples of Canada. *Journal of Health Communication*, 10, 145-162.
- Jiwani, Y., & Young, M. L. (2006). Missing and murdered women: Reproducing marginality in news discourse. *Canadian Journal of Communications*, 31, 895-917.

- Kasper, V. (2014). Long-term depression and suicidal ideation outcomes subsequent to emancipation from foster care: Pathways to psychiatric risk in the Metis population. *Psychiatry Research, 215*, 347-354.
- Krauss, S. E. (2005). Research paradigms and meaning making: A primer. *The Qualitative Report, 10*, 758-768.
- Krebs, A. (2011). Reproducing colonialism: Subject formation and talk radio in English Canada. *Canadian Journal of Political Science, 44*, 317-339.
- Kreiner, M. (2009). Delivering diversity: Newly regulated midwifery returns to Manitoba, Canada, one community at a time. *Journal of Midwifery & Women's Health, 54*, 1-10.
- Li, X., Sun, H., Marsh, D. C., & Anis, A. H. (2013). Factors associated with pretreatment and treatment dropouts: Comparisons between Aboriginal and non-Aboriginal clients admitted to medical withdrawal management. *Harm Reduction Journal, 10*, 1-7.
- Lix, L. M., Bruce, S., Sarkar, J., & Young, T. K. (2009). *Risk factors and chronic conditions among Aboriginal and non-Aboriginal populations*. (Report No. 82-003-x) Retrieved from Statistics Canada:
<http://ahrnets.ca/files/data/3/2011/08/Risk%20factors%20and%20chronic%20conditions%20among%20Aboriginal%20and%20non-Aboriginal%20populations.PDF>
- Maar, M. A., & Shwande, M. (2010, January). Traditional Anishinabe healing in a clinical setting: The development of an Aboriginal interdisciplinary approach to

community-based Aboriginal mental health care. *Journal of Aboriginal Health*, 18-27

Machin, D., & Mayr, A. (2012). *How to do discourse analysis*. London: Sage Publications Ltd.

Marsh, T. N., Coholic, D., Cote-Meek, S., & Najavits, L. M. (2015). Blending Aboriginal and western healing methods to treat intergenerational trauma with substance use disorder in Aboriginal peoples who live in northeastern Ontario, Canada, *Harm Reduction Journal*, 1-12.

Maxwell, K. (2011). Ojibwe activism, harm reduction and healing in 1970s Kenora, Ontario: A micro-history of Canadian settler colonialism and urban Indigenous resistance. *Comparative Programs on Health and Society Working Paper Series 2009-2010*. Munk School of Global Affairs, University of Toronto

Maxwell, K. (2014). Historicizing historical trauma theory: Troubling the trans-generational transmission paradigm. *Transcultural Psychology*, 51, 407-435

McCallum, K. (2013). Distant and intimate conversations: Media and Indigenous health policy in Australia. *Critical Arts Projects and Unisa Press*, 27, 332-351

McCombs, M. E., & Shaw, D. L. (1972). The agenda-setting function of mass media. *The Public Opinion Quarterly*, 36, 176-187.

Mead, G. H. (1964). *Selected writings*. Reck, A. J. (Ed.). USA: The Bobbs Merrill Company, Inc.

Milkie, M. A., Social comparisons, reflected appraisals, and mass media: The impact of pervasive beauty images on black and white girls' self-concepts. *Social Psychology Quarterly*, 62, 190-210.

- Miller, J. (1997). How Canada's daily newspapers shut out minorities. In S. E. Nancoo & R. S. Nancoo (Eds.), *The mass media and Canadian diversity* (pp. 134-139). Mississauga, Ontario: Canadian Editors' Press.
- Namaste, V. K. (1999). Francophone discourse analysis: A case study of representing Native peoples and 'contraband' cigarettes in Anglophone and Francophone Quebec media. *Social Semiotics*, 9, 23-38.
- National Aboriginal Health Organization. (2011). *Drug abuse major concern among First Nations and Inuit*. Retrieved from <http://www.naho.ca/blog/2011/06/27/drug-abuse-major-concern-among-first-nations-and-inuit/>
- National Aboriginal Health Organization (2016). *Terminology*. Retrieved from <http://www.naho.ca/publications/topics/terminology/>
- Olson, R., & Couchie, C. (2012). Returning birth: The politics of midwifery implementation on First Nations reserves in Canada. *Midwifery*, 29, 981-987.
- Park, J., Tjepkema, M., Goedhuis, N., & Pennock, J. (2015). *Avoidable mortality among First Nations adults in Canada: A cohort analysis*. Statistics Canada Catalogue no. 82-003-X. Ottawa, Ontario. Statistics Canada. Released August 19, 2015. <http://www.statcan.gc.ca/pub/82-003-x/2015008/article/14216-eng.htm>
- Park, S. Y. (2005). The influence of presumed media influence on women's desire to be thin. *Communication Research*, 32(5), 594-614. doi:10.1177/0093650205279350
- Parker, I. (1998). *Social constructionism, discourse and realism*. London: Sage Publications Ltd.

- Pierro, R., Barrera, J., Blackstock, C., Harding, R., McCue, D., & Metatawabin, M. (2013). Buried voices: Media coverage of Aboriginal issues on Ontario. *Journalists for Human Rights*.
- Pisorski, J., Watson, B., Yli-Jyrä, A. (2009). Finite-State Methods and Natural Language Processing: Post-proceedings of the 7th International Workshop FSMNLP 2008. Netherlands: IOS Press.
- Prince, K., & Kelley, M. L. (2010). An integrative framework for conducting palliative care research with First Nations communities. *Journal of Palliative Care*, 26, 47-53.
- Public Health Agency of Canada (2011). Diabetes in Canada: Facts and figures from a public health perspective. Retrieved from <http://www.phac-aspc.gc.ca/cd-mc/publications/diabetes-diabete/facts-figures-faits-chiffres-2011/chap6-eng.php>
- Raskin, J. D. (2002). Constructivism in psychology: Personal construct psychology, radical constructivism, and social constructionism. *American Communication Journal*, 5, 1-26.
- Ray, A., & Dutta, A. (2014). Information balance: A case study of print media in India. *International Journal of Scientific and Research Publications*, 4, 1-5
- Retzlaff, S. (2005). What's in a name? The politics of labelling and Native identity constructions. *The Canadian Journal of Native Studies*, 25, 609-626.
- Retzlaff, S. (2006). Power over discourse: Linguistic choices in Aboriginal media representations. *The Canadian Journal of Native Studies*, 26, 25-52.
- Robbins, J. A., & Dwear, J. (2011). Traditional Indigenous approaches to healing and the modern welfare of traditional knowledge, spirituality, and lands: A critical

reflection on practices and policies taken from the Canadian Indigenous example.

The International Indigenous Policy Journal, 4, 1-17.

Royal Commission on Aboriginal Peoples (RCAP). (1996). *Looking Forward, Looking Back – Report of the Royal Commission on Aboriginal Peoples, Volume 1*. Ottawa, Canada: Communication Group Publishing.

Sartorius, N. (2006). The meaning of health and its promotions. *Croat Medical Journal*, 47, 662-664.

Seale, C. (1999). Quality in qualitative research. *Qualitative Inquiry*, 5, 465-478.

Shah, D. V., McLeod, D. M., Gotlieb, M. R. & Lee, N. (2009). Framing and agenda setting. In R. Nabi & M. B. Oliver (Eds.), *The SAGE handbook of media processes and effects* (pp. 83-98). Thousand Oaks, CA: SAGE Publications, Inc.

Shercliffe, R. J., Hamptom, M., McKay-McNabb, K., Jeffery, B., Beattie, P., & McWatters, B. (2007). Cognitive and demographic factors that predict self-efficacy to use condoms in vulnerable and marginalized Aboriginal youth, *The Canadian Journal of Human Sexuality*, 16, 45-56

Shweder, R. A. (2003). *Why do men barbeque? Recipes for cultural psychology*. USA: Harvard University Press.

Skye, A. D. (2010). Aboriginal midwifery: A model for change. *Journal de la Santé Autochtone*, 28-37.

Sloan Morgan, V., & Castleden, H. (2014). Framing Indigenous-settler relations within British Columbia's modern treaty context: A discourse analysis of the Maa-nulth treaty in mainstream media. *The International Indigenous Policy Journal*, 5, 1-19.

- Stewart, H., Williams, M., Cullen, T., Johnston, M., Phillips, G., Mulligan, P...Meadows, M. (2012). Teaching journalism students how to tell Indigenous stories in an informed way. *Asia Pacific Media Educator*, 22, 55-67.
- Strega, S., Janzen, C., Morgan, J., Brown, L, Thomas, R., & Carriere, J. (2014). Never innocent victims: Street sex workers in Canadian print media. *Violence Against Women*, 20, 6-25.
- Synder, M., & Wilson, K. (2015). "Too much moving...there's always a reason": Understanding urban Aboriginal peoples' experience of mobility and its impact on holistic health. *Health & Place*, 34, 181-189
- Statistics Canada. (2006a). *2006 Profile of Aboriginal Children, Youth and Adults*. Statistics Canada Catalogue no. 89-635. <http://www12.statcan.ca/census-recensement/2006/dp-pd/89-635/index.cfm?lang=eng> (accessed September 14, 2015).
- Statistics Canada. (2006b). *Aboriginal Statistics at a Glance*. (chart 13). "Projected life expectancy at birth by sex, by Aboriginal identity, 2017". Statistics Canada Catalogue no. 89-645-x. <http://www.statcan.gc.ca/pub/89-645-x/2010001/c-g/c-g013-eng.htm> (accessed September 14, 2015).
- Statistics Canada. (2009). *Risk factors and chronic conditioned among Aboriginal and non-Aboriginal populations*. "Prevalence of daily smoking, by age group and region, Aboriginal off-reserve population aged 20 or older, Canada 2000/2001 and 2005/2006". "Prevalence of obesity, by age group and region, Aboriginal off-reserve population aged 20 or older, Canada, 2000/2001 and 2005/2006". Statistics Canadian Catalogue no. 82-003-x.

- 003-x/2009004/article/10934/findings-resultats-eng.htm (accessed September 14, 2015).
- Statistics Canada. (2012). *Health at a glance*. "Current Smoking Trends". Statistics Canada Catalogue no. 82-624-x. <http://www.statcan.gc.ca/pub/82-624-x/82-624-x2014001-eng.htm> (accessed September 14, 2015)
- Statistics Canada. (2013). *Health profile, December 2013*. Statistics Canada Catalogue no. 82-228. <http://www12.statcan.gc.ca/health-sante/82-228/index.cfm?Lang=E> (accessed September 14, 2015).
- Tjepkema, M. (2002). *The health of the off reserve Aboriginal population* (Report No. 82-003. Retrieved from Statistics Canada: <http://www.statcan.gc.ca/pub/82-003-s/2002001/pdf/82-003-s2002004-eng.pdf>
- Truth and Reconciliation Commission of Canada. (2015). *Honouring the truth, reconciling for the future*. Retrieved from http://www.trc.ca/websites/trcinstitution/File/2015/Findings/Exec_Summary_2015_05_31_web_o.pdf
- Urban, G. (1981). Language as social semiotics: The social interpretation of language and meaning by M. A. K. Halladay. *American Anthropologist*, 83, 659-661
- Van Den Hoonaard, D. K. (2012). *Qualitative research in action: A Canadian primer*. Don Mills, Ontario: Oxford University Press.
- Van Dijk, T. (1995). Power and the news media. In D. Paletz (Ed.), *Political communication and action* (pp. 9-36). Cresskill, NJ: Hampton Press.
- Van Leeuwen, T. (2005). *Introducing Social Semiotics*. New York, NY: Routledge.

- Van Wagner, V., Epoo, B., Nastapoka, J., & Harney, E. (2007). Reclaiming birth, health, and community: Midwifery in the Inuit villages of Nunavik, Canada. *American College of Nurse-Midwives*, 52, 384-391.
- Von Glasersfeld, E. (2001). The radical constructionist view of science. *Foundations of Science*, 6, 31-43.
- Walker, J., & Rubenson, K. (2014). The media construction of an adult literacy agenda in Canada. *Globalisation, Societies and Education*, 12(1), 143–163.
- Webster, P. C. (2015, February). Housing triggers health problems for Canada's First Nations. *The Lancet*, 385, 495-496
- Wilkes, R., Corrigan-Brown, C., & Myers, D. J. (2010). Packaging protest: Media coverage of Indigenous people's collective action. *Canadian Sociology Association*, 47, 327-357.
- Willig, C. (2008). *Introducing qualitative research in psychology*. New York, NY: The McGraw-Hill Companies
- Wodak, R., & Busch, B. (2004). Approaches to media texts. In J. H. Downing (Ed.), *The Sage handbook of media studies*. (pp. 105-123). London: Sage.
- Wood, A. W. (1988). Ideology, False Consciousness, and Social Illusion. In McLaughlin, B. P. & Oksenberg Rorty, A. (1st Ed.), *Perspectives on Self-Deception*. 345-363. London, England: University of California Press.
- Wood, L. A., Kroger, R. O. (2000). *Doing discourse analysis: Methods for studying action in talk and text*. Thousand Oaks, CA: Sage Publications Inc.

Appendices

Appendix A: Step 1 Database

Source: The National Post	Search: "Aboriginal Health Ontario" - Searched by Relevance	
Date:	Health	URL:
8-28-2014	0	http://news.nationalpost.com/2014/08/28/premiers-make-annual-plea-for-more-federal-money-at-charlottetown-meeting/
8-27-2014	1	http://news.nationalpost.com/2014/08/27/canadian-premiers-move-toward-consensus-for-action-on-missing-and-murdered-aboriginal-women/
8-22-2014	0	http://fullcomment.nationalpost.com/2014/08/22/full-pundit-our-cretinous-marijuana-debate/
7-17-2014	0	http://business.financialpost.com/2014/07/17/no-free-pass-western-canadians-demand-more-from-energy-sector-survey-shows/
7-12-2014	0	http://fullcomment.nationalpost.com/2014/07/11/scott-stinson-wynne-fails-to-deliver-on-open-and-transparent-government-when-it-comes-to-cutting-deficit/
6-30-2014	0	http://news.nationalpost.com/2014/06/30/bu-s-supreme-court-says-public-sector-union-cant-force-nonmembers-to-pay-fees/
6-24-2014	0	http://news.nationalpost.com/2014/06/24/wynne-breaking-apart-ontarios-massive-finance-portfolio-in-revamped-liberal-cabinet/
6-16-2014	1	http://business.financialpost.com/2014/06/16/sr-june-13-jean-paul-gladu-pix-there-is-misconception-that-we-are-a-roadblock/
6-10-2014	0	http://fullcomment.nationalpost.com/2014/06/10/j-c-bourque-instead-of-honesty-and-leadership-kathleen-wynne-serves-up-cynical-hudak-bashing/
6-10-2014	0	http://news.nationalpost.com/2014/06/10/ontario-liberals-misused-1-6m-in-education-funds-lawsuit/
6-7-2014	1	http://fullcomment.nationalpost.com/2014/06/07/national-post-editorial-board-a-conservative-government-for-ontario/
6-6-2014	1	http://news.nationalpost.com/2014/06/06/the-case-of-makayla-sault-highlights-the-fact-that-canadas-aboriginal-people-are-dying-of-cancer-at-record-rates/

Appendix B: Step 5 and 6 Database

Number	Code	Overlexicalization	Structural Oppositioning	Functional Nominalization/Nominalization	Concessions/Hedging	Notes
66	CN24		Lowercase, "aboriginal" throughout, except for when quoting a written statement by Premier Redford (Alberta): this shows that the media is at fault for the lowercasing...not common practice. Many examples of upper and lower case throughout - a good example to demonstrate that Upper case lettering does appear in articles.			"the government has passed legislation to extend matrimonial rights to aboriginal women living on reserve, including access to emergency protection orders, and made investments to improve the justice system"; none of these things are relevant to people who live in Northern communities where the justice system doesn't exist like it does here. Six priorities for gov do not include health, or access to healthcare
67	CN25		"The Canadian government" is appalled by the "federal bureaucrats"; ah...that's you. Calling the current government "Canadian" and the previous government "federal bureaucrats" distances the current government from accountability	"The Canadian government" belongs to all of Canada, thus we have all played a role in what happens to Aboriginal people. "one of their immediate responses"; who are 'their'; there is no accountability, but a blanket 'them'...	"Hungry aboriginal children and adults may have been used as unwitting subjects in nutritional experiments by federal bureaucrats"; may misinuates that maybe not. Quote, "If this story is true..."; provides room for readers to think that the story may not be true.	Aboriginal children were subjected to experiments on nutrition - sometimes starved, and denied food in the name of science....remind you of anyone Hitler? Reference to the Harper apology in 2008 - a blanket apology that suppose to now encompass these actions.
68	CN26			"Grand Chief Derek Nepinuk of the Assembly of Manitoba Chiefs"; important title for the man who is going to disband the Assembly of First Nations.	The narrative that the author is creating could be aimed at getting readers excited about Aboriginal's removing themselves from gov influence (and funding). This speaks to the stereotypical 'chief'. This Aboriginal group does not want anything from the government.	Article is spinning the division of Aboriginal groups as "promising a new direction"; sounds uplifting- the author is directing the reader toward positive feelings regarding the division. Media is spearheading a public argument between the chiefs? This will certainly direct readers to question leadership capabilities.

Appendix C: Media Articles Directly Related to Aboriginal Health

Code	Title	URL
CI04	Makayla Sault's case raises questions about child welfare laws	http://www.cbc.ca/news/aboriginal/makayla-sault-s-case-raises-questions-about-child-welfare-laws-1.2658155
CI05	Mercury poisoning treaty reviewed at WHO Geneva meeting	http://www.cbc.ca/news/canada/thunderbay/mercury-poisoning-treaty-reviewed-at-who-geneva-meeting-1.2649875
CI06	Neskantaga First Nations raises alarm as suicides continue	http://www.cbc.ca/news/aboriginal/neskantaga-first-nation-raises-alarm-as-suicides-continue-1.2627548
CI08	Aboriginal screening boosted by Northeast Cancer Centre project	http://www.cbc.ca/news/canada/sudbury/aboriginal-screening-boosted-by-northeast-cancer-centre-project-1.2527341
CI09	Ring of Fire boom may strain First Nations services, memo warns	http://www.cbc.ca/news/aboriginal/ring-of-fire-boom-may-strain-first-nations-services-memo-warns-1.2483609
CI10	UN aboriginal envoy says Canada is facing a 'crisis'	http://www.cbc.ca/news/politics/un-aboriginal-envoy-says-canada-is-facing-a-crisis-1.2054682
CA01	Grassy Narrows: Why is Japan still studying the mercury poisoning when Canada isn't ?	http://www.cbc.ca/news/health/grassy-narrows-why-is-japan-still-studying-the-mercury-poisoning-when-canada-isn-t-1.2752360
CA03	First Nations fitness firm brings healthy living program north	http://www.cbc.ca/news/canada/thunderbay/first-nations-fitness-firm-brings-healthy-living-program-north-1.2727001
CA11	Clean running water still a luxury on many native reservations	http://www.cbc.ca/news/canada/clean-running-water-still-a-luxury-on-many-native-reserves-1.1081705
CFN01	10 First Nations with more than 10 years of bad water	http://www.cbc.ca/news/canada/thunderbay/10-first-nations-with-more-than-10-years-of-bad-water-1.2755728
CFN02	Aboriginal women inquiry support grows ahead of premiers meeting	http://www.cbc.ca/news/politics/aboriginal-women-inquiry-support-grows-ahead-of-premiers-meeting-1.2747423
CFN12	First Nations elders appeal for long-term care home	http://www.cbc.ca/news/canada/thunderbay/first-nation-elders-appeal-for-long-term-care-home-1.2441750
CN04	LCBO joins campaign against Fetal Alcohol Syndrome	http://www.cbc.ca/news/canada/toronto/lcbo-joins-campaign-against-fetal-alcohol-syndrome-1.2746190
CN07	Midwifery program with core aboriginal mandate halted	http://www.cbc.ca/news/aboriginal/midwifery-program-with-core-aboriginal-

		mandate-halted-1.2701685
CN09	Brian Sinclair inquest wraps with lawyer calling ER death a homicide	http://www.cbc.ca/news/canada/manitoba/brian-sinclair-inquest-wraps-with-lawyer-calling-er-death-a-homicide-1.2672810
CN19	Ottawa's legal bills mount over aboriginal teen's bid for care	http://www.cbc.ca/news/politics/ottawa-s-legal-bills-mount-over-aboriginal-teen-s-bid-for-care-1.2489093
CN25	Hungry aboriginal people used in bureaucrats' experiments	http://www.cbc.ca/news/canada/manitoba/hungry-aboriginal-people-used-in-bureaucrats-experiments-1.1317051
CN34	Aboriginal HIV infections a growing problem in Canada	http://www.cbc.ca/news/canada/manitoba/aboriginal-hiv-infections-a-growing-problem-in-canada-1.1174850
GFN03	Ontario pledges to better help First Nations residents suffering from mercury poisoning	http://www.theglobeandmail.com/news/national/ontario-pledges-to-better-help-first-nations-residents-suffering-from-mercury-poisoning/article19819957/
GFN04	Government dropped call on mercury poisoning, First Nations says	http://www.theglobeandmail.com/news/national/first-nation-says-report-shows-government-played-down-scope-of-mercury-poisoning/article19812418/
GFN11	Midwife provides missing link to Seabird Island native band	http://www.theglobeandmail.com/news/british-columbia/midwife-provides-missing-link-to-seabird-island-native-band/article17712326/
GFN12	Why community paramedicine saves both money and lives	http://www.theglobeandmail.com/life/health-and-fitness/health/why-community-paramedicine-saves-both-money-and-lives/article16905592/
GFN14	Ring of Fire will require more social services for First Nations, government memo says	http://www.theglobeandmail.com/news/politics/ring-of-fire-will-require-more-social-services-for-first-nations-government-memo-says/article16188830/
GFN16	Oxycodone decision puts Health Canada's drug-approval process under scrutiny	http://www.theglobeandmail.com/life/health-and-fitness/health/oxycodone-decision-puts-health-canadas-drug-approval-process-under-scrutiny/article15660903/
GFN17	Ontario First Nation exposed to high levels of pollutants, study finds	http://www.theglobeandmail.com/news/national/ontario-first-nation-exposed-to-high-levels-of-pollutants-study-finds/article15577533/
GFN19	Despite risks, sedatives called 'benzos' widely used	http://www.theglobeandmail.com/life/health-and-fitness/health/despite-risks-

		sedatives-called-benzos-widely-used/article13482915/
GFN20	Experiments on aboriginal children were awful, and they have not stopped	http://www.theglobeandmail.com/news/politics/globe-politics-insider/experiments-on-aboriginal-children-were-awful-and-they-have-not-stopped/article13386906/
GFN34	Ottawa rejects provincial pleas for OxyContin ban	http://www.theglobeandmail.com/news/politics/ottawa-rejects-provincial-pleas-for-oxycontin-ban/article5416967/
GN07	Airlift mix-up at Ontario reserve heightens concerns about oversight of Ornge carriers	http://www.theglobeandmail.com/news/national/airlift-mix-up-at-ontario-reserve-illustrates-concerns-about-ornge-oversight/article15580647/
GN16	How Natives find power in a long-distance walk	http://www.theglobeandmail.com/life/how-natives-find-power-in-a-long-distance-walk/article11873970/?page=all
GN41	Please give: Here's where, and why	http://www.theglobeandmail.com/opinion/please-give-heres-where-and-why/article6651324/
GA09	Edward Snowshoe's death should concern us all	http://www.theglobeandmail.com/opinion/edward-snowshoe-is-dead-that-should-concern-us-all/article19552587/
GA15	Birth Centres: A middle ground between hospital and home	http://www.theglobeandmail.com/news/toronto/a-friendly-middle-ground-between-hospital-and-home-birth/article18592668/
GA16	Sickkids partners with Nunavut on new telepsychiatry program	http://www.theglobeandmail.com/life/health-and-fitness/health/sickkids-partners-with-nunavut-on-new-telepsychiatry-program/article17945791/
GA17	Searing stories at residential-school hearings come to a close	http://www.theglobeandmail.com/news/national/searing-stories-at-residential-school-hearings-come-to-a-close/article17734261/
GA20	Three issues in desperate need of long-term thinking	http://www.theglobeandmail.com/opinion/three-issues-in-desperate-need-of-long-term-thinking/article16363268/
GA24	Aboriginal seniors face more challenges staying healthy, accessing care: report	http://www.theglobeandmail.com/news/national/aboriginal-seniors-face-more-challenges-staying-healthy-accessing-care-report/article15648102/
GA27	The obstacles to dental care for adults with disabilities	http://www.theglobeandmail.com/news/british-columbia/the-obstacles-to-dental-care-for-adults-with-disabilities/article14918703/

NA04	Case of Makayla Sault highlights the fact Canada's Aboriginal people are dying of cancer at record rates	http://www.nationalpost.com/m/news/blog.html?b=news.nationalpost.com/2014/06/06/the-case-of-makayla-sault-highlights-the-fact-that-canadas-aboriginal-people-are-dying-of-cancer-at-record-rates
NA05	Makayla Sault's parents say they have no regrets over girl's decision to opt for holistic cancer treatment	http://news.nationalpost.com/news/canada/makayla-saults-parents-say-they-have-no-regrets-over-girls-decision-to-opt-for-holistic-cancer-treatment
NA06	Saving Makayla Sault from medical ignorance	http://news.nationalpost.com/full-comment/national-post-editorial-board-saving-makayla-sault-from-medical-ignorance
NA07	Christie Blatchford: Evangelical Christianity and aboriginal healing come together to battle transparency and accountability	http://news.nationalpost.com/full-comment/christie-blatchford-evangelical-christianity-and-aboriginal-healing-come-together-to-battle-transparency-and-accountability
NA08	Is a treatment decision what Makayla Sault really needs?	http://news.nationalpost.com/full-comment/christie-blatchford-is-a-treatment-decision-what-makayla-sault-really-needs
NA09	Eleven year old's choice to treat her cancer with indigenous medicine instead of chemo may be legal, experts say	http://news.nationalpost.com/news/canada/eleven-year-olds-choice-to-treat-her-cancer-with-indigenous-medicine-instead-of-chemo-may-be-legal-experts-say
NA10	Children's aid steps in after 11-year old trades chemo for native remedies	http://news.nationalpost.com/news/canada/girls-decision-to-drop-chemotherapy-in-favour-of-aboriginal-medicine-prompts-childrens-aid-intervention
NA17	As media coverage of suicides becomes more common, debate rages over whether this is a positive change	http://news.nationalpost.com/news/canada/as-media-coverage-of-suicides-becomes-more-common-debate-rages-whether-that-is-a-positive-change
NA18	Federal funding not a problem for First Nations as yearly spending has risen to \$9056 per capita, study finds	http://news.nationalpost.com/news/canada/federal-funding-not-a-problem-for-first-nations-as-yearly-spending-has-risen-to-9056-per-capita-study-finds
NA19	Tooth decay in toddlers a leading cause of day surgery and dental extractions among preschoolers: report	http://news.nationalpost.com/health/tooth-decay-among-toddlers-a-leading-cause-of-day-surgery-and-dental-extractions-report?lisa=0b56-3850
NA24	Colin Alexander: In Canada's north, a suicide epidemic	http://news.nationalpost.com/full-comment/colin-alexander-in-canadas-

		north-a-suicide-epidemic
NA34	Suicide crisis forces First Nations community to declare state of emergency	http://news.nationalpost.com/news/canada/suicide-crisis-forces-remote-first-nations-community-to-declare-state-of-emergency
NA36	Poor diet on native reserves blamed for higher rate of severely overweight babies: study	http://news.nationalpost.com/news/canada/poor-diet-on-reserves-blamed-for-higher-rate-of-severely-overweight-aboriginal-babies
NA60	End-of-life battles expose the culture in Canada's intensive care units	http://news.nationalpost.com/news/canada/end-of-life-battles-expose-the-culture-clash-in-canadas-intensive-care-units
NF09	Girl, 11, with cancer is free to refuse chemotherapy, Children's Aid officials rule	http://news.nationalpost.com/news/canada/girl-11-with-cancer-is-free-to-refuse-chemotherapy-childrens-aid-officials-rule
NF16	Peter Foster: Neil Young's misguided assault on Alberta oil sands doing a disservice to natives	http://news.nationalpost.com/full-comment/neil-youngs-misguided-assault-on-alberta-oil-sands
NF45	The problems in native reserves? Ask a veteran MD who worked there	http://news.nationalpost.com/full-comment/jonathan-kay-whats-wrong-with-remote-native-reserves-lets-ask-a-doctor-who-worked-there-for-43-years