

Critical Race and Whiteness Studies



www.acrawsa.org.au/ejournal

Volume 11, Number 1, 2015

SPECIAL ISSUE: THE WHITE MAN'S BURDEN 'AFTER RACE'

Settling the Table: Northern Food Subsidy Programs and the (Re)Colonisation of Indigenous Bodies

Kristin Burnett

Lakehead University

Travis Hay

York University

Lori Chambers

Lakehead University

In the post-World War Two period, the federal government of Canada initiated a series of food subsidy programs (the Food Mail Program and Nutrition North Canada) and nutrition and health education initiatives that were officially intended to address hunger and malnourishment in Northern Indigenous communities by imposing settler foodways on Indigenous people. Interrogating food subsidy programs and nutrition and health education initiatives as part of a broader settler colonial project of Indigenous elimination, this paper reveals the ways in which the Canadian federal state employs contemporary discourses of development and humanitarianism to legitimise and normalise its presence and actions in Northern Indigenous territories.

Keywords: Indigenous people, settler colonialism, Food Mail Program, Nutrition North Canada, northern development, foodways

In the post-World War Two period, the federal government of Canada initiated a series of food subsidy programs and nutrition and health education initiatives that were officially intended to address hunger and malnourishment in Northern Indigenous communities by imposing settler foodways on First Nations and Inuit people.¹ The historical conditions that made such state interventions appear

¹ The Canadian Far North refers to the geographical regions located above the 60th parallel that are currently divided into Nunavut, the Northwest Territories, and the Yukon. The provincial Norths are part of the subarctic regions of Canada, which stretch

necessary were the product of a long history of settler colonialism that witnessed the destruction of Indigenous foodways. Deeply troubling is the fact that many of the same strategies of settler colonial statecraft employed by the federal state in the nineteenth century—such as the confinement of Indigenous people to reserves removed from land and water based resources—persist in various iterations today. Moreover, the federal government discourses that accompany such policies inscribe a distinctly Canadian historicity of humanitarianism and ‘northern development’ onto Indigenous experiences of settler colonialism. Interrogating food subsidy programs and nutrition and health education initiatives as part of a broader settler colonial project of Indigenous elimination, this paper reveals the ways in which the Canadian federal state employs contemporary discourses of development and humanitarianism to legitimise and normalise its presence and actions in Northern Indigenous territories. As this paper demonstrates, the origins of food insecurity for Indigenous people derive from a settler governmentality and its control of foodways. Unfortunately, the solution proposed by the federal government to deal with food insecurity is further state interference and control, and these regulatory projects are inevitably structured for the purposes of making Indigenous people less ‘Indian’.

Since the federal government publicly supports Indigenous self-government in order to allow “aboriginal communities to contribute to, and participate in, the decisions that affect their lives and carry out effective relationships with other governments,” the state must justify its settler governmentality and interventionist approach to Indian policy (Aboriginal Affairs and Northern Development Canada, 2010). We argue that the state manufactures so-called crises of community wellness in Northern Indigenous communities, or perpetual ‘states of emergency’, to harness the uncritical support of non-Indigenous people in Canada and justify the state’s ‘humanitarian’ interventions into Indigenous peoples’ lives. Thus, Indigenous communities and people are separated from their historical contexts and experiences and endlessly identified as sites of disorder through their failure to be more like the dominant society, to make the correct lifestyle choices, or to put healthy food into their bodies (in other words: to be white). In this manner, the liberal federal state makes itself appear “obligated” to assist so-called dysfunctional Indigenous communities into becoming “cooperative, representative, and especially stable entities” so that proper development can occur (Duffield, 2007, p. 11). As a result, the Canadian state is transformed in the eyes of its white citizens and the western world from a violent settler colonial entity into a liberal humanitarian government that is obligated to help, save, and make secure the lives of First Nations and Inuit people. As Didier Fassin and Mariella Pandolfi (2010) write, the “humanitarianization of intervention implies the neutralization of conflict situations. Now it is as if the only issue were to aid victims, as if the local context presented no historical particularities” (pp. 10-12). Of course, Canadian settler governmentality is historically particular, and to ignore its context obscures the broader “western nationalist discourse, which normalizes its own history of colonial expansion and exploitation by inscribing the history of the other in a fixed hierarchy of civil progress” (Bhabha, 1994, p. 136).

across Canada from east to the west and are divided by the Canadian Shield and the Northern Arctic (Far North) regions.

The myth of Canadian humanitarianism and benevolence that crystallises through state discourses of development in the North is particularly powerful. Through these discourses, Indigenous people can simultaneously (and contradictorily) be cast as part of the problem by standing in the way of 'development' as well as being desperately in need of 'progress', to which government-directed development is the solution. Thereby, the goal of humanitarianism, much like in other colonial locales, is carried out with the goal of complete societal reconstruction (Duffield, 2001). Literature that looks at the relationship between humanitarianism and development suggests that those practices that inform imperialism through the operation of global capitalism rely on the existence of a perpetual "state of emergency" wherein crisis is the rule rather than the exception (Agamben, 2008). Mark Duffield argues that development has become the western world's way of dealing with what he identifies as surplus populations through trusteeship that is "educative tutelage over an otherwise superfluous and possibly dangerous population that needs help in adapting to the potential that progress brings" (2007, p. 9). While very important, much of this work overlooks how these relationships operate inside western democracies that are also settler states and how discourses of development and humanitarianism function within those spaces.

Newer practices and policies of elimination in the twenty-first century have been couched in the language of development, opportunity, and incorporation, which is characterised by a preoccupation with inclusion rather than a logic of separation. According to Scott Morgensen, "settler colonialism produces settler societies by pursuing the elimination of Indigenous peoples via amalgamation" (2011, pp. 52-76). Thus, the violent efforts of the state to eliminate or transform Indigenous people are part and parcel of a broader ideology of multicultural, neoliberal individualism that reconstitutes the old colonial trope of the 'white man's burden,' *la mission civilisatrice*, or the "save-the-savages-argument" (MacPherson & Rabb, 2011). As Himani Bannerji and Sunera Thobani have correctly observed in Canada, multiculturalism, as an official government policy, always serves to constitute difference in contrast to the "core of the nation [which is always] defined as bilingual and bicultural" and thus white (Thobani, 2007, p. 145 and Bannerji, 2000, p. 88). As a consequence, humanitarian efforts that seek to fold Indigenous peoples into a liberal and multicultural Canadian polity are necessarily sidled with assimilatory logics that try to bridge the gap between white and Indigenous peoples. In this frame, Indigenous peoples are asked to relinquish everything that makes them Indigenous and gleefully accept the 'complete societal reconstruction' that is accomplished by 'northern development.'

In order to unpack the connections between humanitarianism and development we must look at how racial identities have been constructed and secured in North America in general and Canada in particular. It is therefore not irrelevant to recall that, at the turn of the nineteenth century, theories of scientific racism predicated on universalist notions of man confirmed that Indigenous people were racially inferior and that white North Americans were superior by virtue of being more evolved. Such beliefs were articulated through characterisations of Indigenous peoples as sickly, helpless, and lacking in basic bodily knowledge, which corresponded to constructions of Canada and its white citizenry as healthy, powerful individuals endowed with a modern scientific understanding of the body (LaRoque, 2010, p. 4; Memmi, 1991, p. 79). This narrative was fundamental to

the broader logic of settler colonialism in Canada wherein Indigenous peoples were discursively displaced from their lands as "Indians" and a white settler presence in North America was naturalised as 'native' to the continent (Veracini, 2010, p. 22). Through the fabrication of settler origin myths

it is believed that white people came first and that it is they who principally developed the land; [Indigenous] peoples are presumed to be mostly dead or assimilated. European settlers thus become the original inhabitants and the group most entitled to the fruits of citizenship. (Razack, 2002, p. 2)

Thus constituting the "exalted subject" (Thobani, 2007) of the national imaginary, the white settler is the proper national subject situated teleologically between original inhabitants (read: "Indians") and racialised minorities. The national subject, moreover, is understood "as the embodiment of the qualities said to characterize nationality", and, as we shall see, the "exaltation" of this essential white Canadian settler "has been key to the constitution of the national subject as a particular kind of human being" (p. 5).

The processes of settler colonialism and racialisation whose continuity we track through food and government policy were much more visible as explicitly racist at the turn of the nineteenth century. The forced settlement of Indigenous people on reserves, the consolidation of the *Indian Act* in 1876, the creation of the pass system, and the establishment of the Residential School system, to name but a few, have all been widely accepted as functions of colonial violence, racism, and assimilationist modes of colonial statecraft. However, the formation of a supposedly post-racial, multicultural, and neoliberal democratic society in the latter half of the twentieth century has made the operation of racism and settler colonialism more difficult to "identify, track, and dismantle" (Preston, 2013, p. 43). Thus, in order to see these processes through the myth complexes of multiculturalism or, to borrow from Jodi Byrd (2002), "colonialism's cacophony", we must work harder to name the ongoing processes and logics of Indigenous elimination as settler colonialism and racism. Reviewing federal Indian policies and food subsidy programs that have operated in Northern First Nations communities since World War II demonstrates the extent to which a colonial and genocidal assault against Indigenous peoples persists in Northern Canada, despite the spin provided by contemporary federal governments. Focusing on the material history of food in Northern Indigenous communities, as well as analysing the discursive modes of subject formation in Canada, we suggest that federal policies related to nutrition and health in First Nations and Inuit communities are predicated on the colonial assumption that Indigenous peoples in Canada suffer from a lack of whiteness that can be 'cured' through western-style education and development.

Whiteness as the Logic of Assimilatory Nutrition Initiatives

Central to our formulation and reading of Canadian colonial history is the notion that whiteness operates as a fundamentally discursive category and not simply as a biological constitution of a population or phenotypic expression of an individual. In addition to its genetic or phenotypic context, whiteness is constituted by a set of state-sanctioned practices, behaviours, and performances that are associated with achieving individual as well as collective health,

independence, and well-being in a white industrial-capitalist society. Recalling Thobani's critique, whiteness is understood to be a manifestation or embodiment of certain qualities that correspond to a sense of the national character. It is in this precise context that we claim the federal government has imagined Indigenous communities and their food-practices as requiring a kind of whitening accomplished by and through the coercive implementation of market-based and settler-controlled systems of food production and consumption.

To be sure, the efforts of the federal government to assimilate Indigenous people in the pre-World War II period have been well examined. For instance, Ottawa's attempts to enforce an individual western agricultural model on Indigenous communities and the resultant erosion of communities' access to traditional hunting, fishing, and harvesting, have been well documented (Carter, 1993; Ray, 1974; Krech III, 1986; Innis, 1999). Even so, a sustained examination of the state's introduction of commercial based-foods and programs to replace Northern Indigenous foodways has not been undertaken. Instead, the language and politics of benevolence, social welfare, and humanitarianism employed to help 'less fortunate' populations has obscured ongoing racist and colonial efforts to reproduce European-Canadian visions of domesticity and home-life in Indigenous communities. In the latter half of the twentieth century, 'racial' problems are redefined as 'moral/social' problems and seemingly benign and benevolent programs intended to benefit populations considered to be in crisis help to build the epistemological foundations that

racisms have relied [upon because] racisms are not only visual ideologies. They are based on how allegedly visual signs of race are tied to their non-tangible markers ... cultural competencies, moral dispositions, mothering or sexual instincts, inclinations to delinquency or to voracious sexual desires. It is in these fungible assessments of cultural distinctions that the power of racisms thrive. (Stoler, 2002, p. 4)

Indeed, this cultural/ moral obfuscation becomes particularly clear when we look at the ways in which the settler state has sought to impose a European-Canadian version of how nutritious foods are procured, produced, and consumed in Indigenous communities.

Framing the Historical Narrative of Northern Health and Diets

Since their inception in 1942, the Canadian Official Food Rules have served as a central component of state-sponsored efforts to ensure a particular physical and cultural vision of Canadian citizenship (Mosby, 2012, p. 410). A vision that "prioritized middle-class food customs and efficiency regimes derived from capitalist time-management principles" (Iacovetta & Korinek, 2004, p. 198). As they related to Indigenous people and nutrition, these practices of whiteness and citizenship included eating certain types of foods that had been certified as scientifically 'healthy' by 'experts,' participating in a commercial food economy, as well as making responsible choices about what one chooses to put into one's body. Ongoing federal Indian policies, food subsidy programs, and nutrition education initiatives have been and continue to be predicated on the assumption that ill-health in Northern Indigenous communities has nothing to do with poverty, the exorbitant cost of healthy food, nor a history of colonialism. Instead,

this violence is discursively encoded as signifying a failure of Indigenous populations to effectively perform the public and private practices of a modern, healthy citizenship prescribed by the Canadian government. According to Ottawa, high rates of nutrition-related diseases in Northern Indigenous communities (most notably, type-II diabetes) and the failure of Indigenous people to attain a 'modern, healthy citizenship' can be explained away as a vestigial complication of their ancestral history and a profound inability to 'acculturate' to a modern, civilised, neoliberal, and democratic society. As a result, Indigenous peoples are understood by the dominant society as possessing a fundamental and ultimately fatal alterity to whiteness (Byrd, 2011, p. 228).

Complicating the supposedly benevolent intentions of the state to improve the diets and health of Northern Indigenous people through food subsidy programs and nutrition educational initiatives are the high rates of chronic illness currently experienced in many Northern Indigenous communities. Recent studies show that Northern Indigenous peoples suffer from certain nutrition-related diseases that non-Indigenous peoples do not, such as scurvy (Dialogos Education Consultants Inc., 2004a, 2004b; Duhaime, Myers & Powell, 2004). The failure of 'scientific and modern' (read: white and European-Canadian) solutions to ameliorate ill-health in Northern Indigenous communities has forced the federal government to find an alternative explanation for the failure of almost a century of Indian policy (see Perry, 2001; Carter, 1997). Consequently, the Canadian government and *Health Canada*² have resorted to blaming Indigenous peoples' fundamental nature as harbouring natural predispositions to nutrition-related diseases. This contemporary discourse is a repackaging of nineteenth century scientific racism that locates high rates of morbidity and mortality in the supposed failure of Indigenous peoples to adapt to modernity and civilisation (Kelm, 2005, p. 375). At the same time, it discursively reconstructs Canadian citizenship as a performance of certain state-sanctioned behaviours in one's public and private life. This governmentality imagines Indianness as an essence that needs to be translated or transferred into whiteness through federal policies (see Veracini, 2010; Wolfe, 2006, p. 388). Bianca Isaki's (2011) notion of 'settler home-making' as a technology of colonial power is extremely relevant here. She writes that "settler home-making constellates property regimes, investments in single family-homes, *jus sanguinis* doctrines of citizenship that create family ties to the settler state, and personal things, such as bodies, feelings, and family" (p. 83). What follows from Isaki's formulation is the idea that the deeply interconnected imaginaries of race and nation work within the same discourse as white settler citizenship. These knowledge-producing practices understand Canadian citizenship as fixed within white, modern, healthy, and consumptive family units. In this schema, foodways are "a particular handle whereby we may announce [or fail to announce] our fitness as a political settler subject that is keyed to our historical moment" (Isaki, 2011, p. 84).

We see this racialisation process most clearly when we look to how Indigenous domestic space has been cast as alien and in desperate need of reform from without. Not only has the predominance of diet-related illness in Northern Indigenous communities been used to preclude Indigenous people from the category of whiteness, it has also been used as an opportunity to transform the

² Health Canada is the federal department that is responsible for the health and welfare of Canadian citizens.

form and function of Indigenous domestic space in deeply gendered and sexualised fashions. Health care professionals and researchers in particular have picked up and perpetuated this discourse. For instance, the First Nation's version of a set of clinical guidelines distributed by the Canadian Diabetes Association and intended to help practitioners address and improve patient care for Indigenous people, instructed health workers to explain how and where First Nations should eat their meals:

Eat meals with your family: why: eating together is important. This makes mealtimes enjoyable and sets a good example for your children. It is a way to show respect and thanksgiving for the gifts of life and food that you have been given ... Eat three meals a day. Space them no more than six hours apart. Why: Eating the right amount at the right time helps keep your blood glucose in balance. This is the way that the Creator made the body to work. (Canadian Diabetes Association, 2011)

On overt display in this paragraph are the kinds of sterile, sanitised, multicultural sentiments that characterise the broader discourse of Canadian neoliberalism. In this view, all that is required to construct solutions for racialised and marginalised populations is to put an 'ethnic' spin on what works for white people. Cherokee scholar Andrea Smith critiques multiculturalism and racism from an Indigenous perspective when she discusses the "politics of inclusion" that seek to incorporate Indigenous people in white settler projects of civil progress by engaging in gestural activities such as "slapping a medicine wheel" on the "white" normative solution and transplanting it into Indigenous communities as an authentically "Indian model" (2011). Consequently, these crises of supposed disorder also justify and demand further state interventions. In the pages that follow, we show how Family Allowances, the Food Mail Program (FMP), and Nutrition North Canada (NNC) are settler colonial technologies intended to produce a particular version of Canadian citizenship, rather than healthy, modern, Northern communities of Indigenous peoples. We theorise that these programs were structured and informed by a settler colonial logic of Indigenous elimination that tries—always unsuccessfully—to 'develop' or 'civilise' Indianness into whiteness.

Canadian State and Food Subsidy Programs

The decline of fur prices in the late 1940s and 1950s coincided with significant transformations in the social, political, and economic lives of Northern Indigenous people. Provincial hunting laws, resource development, and environmental pollution drastically reduced the ability of Northern First Nations to continue to feed their families solely through hunting, fishing, and the harvesting of non-timber forest products (Gulig, 2003, p. 82; Tough, 1995). Significantly, these events also aided the government's imposition of an industrial capitalist economy based on resource extraction. These events forced Northern Indigenous people to increasingly rely on commercial foods shipped in from southern locales at grossly inflated prices. The first program used by the state to envelope Northern Indigenous people into the commercial food economy and direct their commercial food purchases was the Family Allowance program,

which was introduced in 1944.³ Under this program, all Canadian mothers, regardless of income, received a monthly payment from the federal government based on the age and number of their children (Blake, 2009). While Family Allowances were the first universal social welfare measure passed in Canada, they represented something entirely different for Northern Indigenous peoples. Indian Affairs determined that Family Allowances could only be spent on an “approved list [of food and goods] prepared on the advice of medical officials of the Branch and dietary authorities of the Sick Children’s Hospital, Toronto” (Department of Mines and Resources, 1946, p. 212). To ensure that the list was adhered to, the department enlisted the cooperation of the Hudson’s Bay Company (HBC) as well as non-Indigenous traders in the region. The department instituted these surveillance measures because they were convinced that Indigenous people lacked “any sense” and had proven unable “when work is plentiful and wages high, to provide for their future needs or to spend their earnings on worthwhile projects” (Department of Mines and Resources, 1942, p. 136). Thus, according to the government, even though First Nations were partaking in a commercial economy, they would be forever unable to fully realise the European-Canadian domestic ideal of the white protestant nuclear family. On the basis of this racist assumption, the state saw a need to carefully control and monitor how that spending took place.

Foods were restricted to items considered to be of “high nutritive value” such as “canned tomatoes (or grapefruit juice), rolled oats, Pablum, pork luncheon meat (such as Spork, Klick or Prem), dried prunes or apricots, and cheese or canned butter” (Moore, 1945; Mosby, 2013, p. 156). The food list allowed for Family Allowances was informed by nutritional tests undertaken at Norway House in 1942, as well as broader assimilatory logics that demanded Indigenous peoples adopt white European-Canadian foodways. The list of allowable food was generated by Dr Percy Moore (head of Indian Affairs’ Medical Services Branch) and was based on the advice of nutrition experts Frederick Tisdall, Theodore Drake, and Alan Brown—each of them Canadian paediatricians who performed nutritional experiments on Indigenous children attending residential schools (see Tester & Kulchyski, 1994, pp. 114-19; Shewell, 2001, pp. 146-50; Shewell, 2004, p. 208; Mosby, 2013). Family Allowances were not entirely about improving household incomes to ensure better health outcomes for Indigenous children. When combined with the list of permissible foods, Family Allowances were about symbolically transforming Indigenous people from an unhealthy Indianness to healthy white citizenship through the consumption of certain types of food and the performance of European-Canadian domesticity.

A major example of this mid-twentieth century settler colonial governmentality of changing Indianness into whiteness was the invention and introduction of Pablum and powdered milk into First Nations and Inuit diets, especially in the provincial and far Norths. Pablum was a creation of post-WWII efforts to resolve child malnutrition and vitamin deficiencies through the invention of a fortified cereal. Its originators were Canadian paediatricians Tisdall, Drake, and Brown from Toronto’s Hospital for Sick Children. The 1930s and ’40s witnessed the convergence of “commercial, public health, and medical and scientific interests

³ After the federal government passed the *Family Allowance Act* in 1944, mothers were entitled to monthly payments based on the age of their children (\$5 for children under the age of six and \$8 for children from thirteen to sixteen years of age).

[which] strongly encouraged mothers to modernize their infant feeding practices” (Nathoo & Ostry, 2009, p. 87). Pablum symbolised the ability of ‘modern science’ to fix social and economic inequity, as well as overcome the imaginary defects of Indigenous peoples seen as stuck in an evolutionary stasis. More importantly, for our purposes, the history of Pablum also illuminates how racial logics of settler colonialism are regularly operationalised through gender, as Indigenous women and their infants were singled out as being of particular nutritional concern (Johnson, 1957).

Indigenous women have been and continue to be scapegoated as the cause of their children’s ill-health. In part, this maternal condemnation was a function of the larger burden placed on mothers generally by the medical profession at the turn of the nineteenth century (Comachio, 1998, p. 92). Indigenous women, however, faced a much higher degree of surveillance and criticism than their European-Canadian counterparts because they did not conform to European-Canadian domestic norms. Reports from the Department of Indian Affairs (DIA) and the work of its agents constantly sought to reshape the domestic skills of Indigenous women through public health nurses, field matrons, and residential schools, as well as the establishment of mother’s meetings, well-baby clinics, and homemaker’s clubs. At the root of all of these initiatives lay the assumption that Indigenous modes of domesticity and food production were purely pathological and provoked the potential destruction of the Canadian Nation.

Under the Family Allowance program, “such foods as milk, tomatoes and Pablum, largely unknown prior to Family Allowances, are now familiar in the far North [and came to] constitute a large percentage of Family Allowances expenditures” (Department of Mines and Resources, 1949, p. 203). Notices for Pablum and milk posted at HBC forts expressed thinly veiled warnings and open claims of paternal ownership of Indigenous children by an imperial monarch: “Our King has made a law that all mothers of children will get help in seeing that his children grow up to be strong and healthy” (Moore, 1947). This aggressive program concentrated on introducing strict daily feeding routines, altering what kinds and when supplementary foods were to be introduced to infants in addition to changing the time-period when breast-feeding should be terminated (Tisdall, 1945; Bartlett, n.d). These instructions were distributed at HBC posts, nursing stations, at treaty payment time, and by medical officers. Instructions for ‘feeding Indian babies’ were also circulated by the Indian agent, which gave the guidelines an unstated authority. These “Health Rules for Feeding Indian Babies” outlined strict instructions regarding the appropriate length of time to breast feed infants and when and how to bottle feed (Tisdall, 1945; Bartlett, n.d).

In a particularly poignant example of the settler colonial governmentality of whiteness, government officials insisted that the prolonged breastfeeding of children practiced by Indigenous mothers, and *not* the disruption of traditional hunting and fishing practices due to the growing militarism of the North or increasing contact with non-Indigenous people and government policy, was to blame for high infant mortality rates (Lewis, 1947). As a survey of foods on the allowable items on the family allowance list from 1948 to 1955 showed, the purchase of Pablum and powdered milk by the Inuit had gone from 60 to over 1400 units in less than eight years, and presumably corresponded to a sharp decline in breastfeeding (Native Welfare, n.d.). By 1955, letters between company post managers and the head office revealed that the Family Allowance

had a severe impact on the manner in which mother's fed their children. It is also worth referencing the fact that, according to the International Diabetes Federation, "the prevalence of obesity is 50% higher among never-breastfed children compared with breastfed children, and the duration of breastfeeding is inversely correlated with the risk of development of obesity." Moreover, diabetic ketoacidosis (DKA) "is the leading cause of mortality, and morbidity in children with type-I diabetes" (2007).

The Foodmail Program

By 1960, it quickly became clear that Family Allowances were inadequate to resolve the malnutrition and poverty in Northern Indigenous communities in the face of declining access to traditional foodways and rising costs of commercial food. As a result, the federal government initiated a food subsidy program that ran through Canada Post called the Air Stage Subsidy, popularly known as the Food Mail Program (FMP). The FMP was designed to help offset the high cost of shipping market-based foods into Northern communities, especially those communities that were (and are) only accessible by air or briefly by winter roads. The state used the FMP to change the dietary habits of Indigenous people by shifting them away from traditional harvesting, hunting, and fishing practices to relying heavily on commercial foods that were much less nutritious and much more expensive (Grier & Majid, 2010).

Logistically, the program was meant to enable the Northern Store, individual consumers, and any other potential (but mostly non-existent) grocers to order fresh foods and essential products at a subsidised rate from bulk or wholesale retailers in the south. The conditions that had to be satisfied for one to receive this humanitarian relief was that the individual or business in question had to be located in a reserve or community that did not have year-round access to: "road, rails, and marine service" (Health Canada, 2000). 135 communities were eligible for the program. The Nishnawbe-Aski Nation (an umbrella organisation representing 49 First Nations communities in Northwestern Ontario that are mainly fly-in or winter road access only) commissioned its own study in 2000, which determined that "the monthly cost of feeding a family of four in Fort Severn, located on the shores of Hudson's Bay, is \$1,397.09 compared to \$589.09 in Burlington" (Verma, 2000).⁴

In 2008, Graeme Dargo, partner of Dargo and Associates Consulting Firm, conducted an investigation and recommended that the program be eliminated so that a free market system could operate properly in the region and thus 'naturally' lower the cost of food through competition. In 2011, the federal government officially replaced FMP with Nutrition North Canada (NNC). However, due to enormous protest by community stakeholders, NNC was not formally implemented until October 2012. Officially, the FMP was terminated because it failed to improve Northern Indigenous peoples' access to healthy foods and had become too costly. Under NNC, subsidies are now paid directly to the retailers who are then expected to pass on savings to consumers at the point of purchase.

⁴ Burlington is a city located in southern Ontario roughly in the geographic centre of the urban corridor known as the Golden Horseshoe. It has a population of 175,779 people as per the 2011 census (Burlington, 2013).

NNC services fewer communities and subsidises less food and other essential goods than did the Food Mail Program. In an alleged effort to target subsidies towards healthy foods under the assumption that ill-health in Indigenous communities is a function of bad food choices, NNC only subsidises a select list of foods deemed healthy according to 'scientific knowledge.' NNC dropped necessities such as diapers, dental hygiene products, toilet paper, shampoo, fishing nets, boat motor parts, ammunition, gas (things necessary to pursue hunting and fishing activities) and the rather large and ambiguous category of "medical devices" (Aboriginal Affairs and Northern Development Canada, 2010). Most significantly, bottled water is no longer subsidised, whereas of October 31st, 2013, 118 reserves were under boil water advisories (Health Canada, 2013). Currently, the cost of food remains prohibitively high in Northern communities and the Northern Store operates under a virtual monopoly.

Who Is to Blame When Intervention Fails?: Race-Based Explanation for Nutritional Failure

Over the last decade or so, nutrition and health literature from government departments such as *Health Canada* or Aboriginal Affairs and Northern Development Canada (AANDC) (particularly in reference to the prevalence of type-II diabetes in Indigenous communities) has increasingly drawn on the notion that nutrition-related diseases can be directly correlated to the natural frailty of Northern Indigenous people. According to this state literature, the real diagnosis for diet-induced illnesses is not actually the lack of affordable fresh food, but rather, the corrosion of a pre-contact version of Indianness—a romanticised vision of an authentically 'traditional' lifestyle. Such discourses of evolutionary stasis suggest that not only are Indigenous people excluded from the possibility of ever fully attaining whiteness and modernity, but also demonstrates that the settler colonial logic of Indigenous transfer does not believe in its own feasibility. This self-contradictory logic fixes Indigenous peoples firmly within the "shifting boundaries of barbarity and civility" and speaks to the ambivalence inscribed at the very basis of colonial authority (Bhabha, 1994, p. 115). Significantly, however, this colonial logic ignores the actions and policies of the federal government over the past century which have: confined Indigenous people to static reserves often without access to sufficient land and water based resources to support themselves; eroded the ability of Indigenous people to pursue hunting, fishing, and gathering activities through provincial hunting laws and resource development; and the destruction of Indigenous people's environmental knowledge through the internment of thousands of children in residential schools.

Literature from various government departments and the federal and provincial iterations of *Health Canada* identifies 'Aboriginal' as the first and primary risk category for developing diabetes. In 2008, an information pamphlet issued by *Health Canada* under the Aboriginal Diabetes Initiative reported that "Aboriginal people have a higher chance of getting type-II diabetes. Before, older people used to get diabetes, but now, Aboriginal people are getting it a lot younger because their traditional lifestyle has changed so fast." This pamphlet echoed earlier *Health Canada* literature that reported in 2000 for example, that

Due to the nomadic lifestyles and feast/famine cycles of their ancestors, Aboriginal peoples in Canada are likely to be genetically predisposed to store energy very efficiently. The adoption of a market diet high in energy, saturated fat and simple sugars, along with an increased tendency towards sedentary lifestyles and reduced physical activity, leads to a rise in the prevalence of obesity and subsequently diabetes.

Structurally, the phrase “adoption of a market diet” refers to Indigenous peoples as the active subjects who have wilfully abandoned their foodways (*Health Canada*, 2000). The claim that “their traditional lifestyle has changed so fast” creates an absent referent of colonial violence and the racial power at play in the destruction of traditional Indigenous social relations (Adams, 1990; Smith, 2005). In other words, rather than blaming the contemporary reality and ongoing histories of Canadian settler colonialism and resource development for community wellness crises in First Nations and Inuit communities, the Canadian government blames the ancestors of Indigenous peoples. Because colonialism functions as an absent referent, such rhetoric paves the way for a reimagining of interventionist and colonialist projects (such as the FMP and NNC) as neoliberal and humanitarian projects of northern development.

A provincial restatement of this theme can be found on the *EatRight Ontario* website (2013) which outlined the following two reasons why First Nations people are more susceptible to diabetes:

1. Extra weight around the belly area. This is where Aboriginal people tend to put on extra weight and it is a risk factor for developing diabetes.
2. Drastically changing lifestyles. Traditional diets with foods such as wild game and seasonal vegetables and fruit are healthier than the higher calorie and less nutritious diets of today. People are not as active as they used to be when they used to walk everywhere, hunt, fish, trap, gather fire wood and haul water.

What becomes clear through this literature is that the ‘experts’ have determined that the supposedly rapid transition from a hunter/gatherer lifestyle is the root cause of diabetes in First Nations communities. The desire to find an evolutionary rationale for high rates of diet-related disease morbidity in Indigenous communities has led federally-funded researchers to try and identify diet-induced illnesses in Indigenous peoples as a function of an ‘Indian’ prehistory that undoes the otherwise scientifically-formulated and rationally-conceived projects of humanitarian development. As one government report claimed in 2009:

There is a growing concern among health authorities over the rapid emergence of lifestyle diseases, such as diabetes, cardiovascular disease, colorectal and breast cancer, as well as hypertension to which lifestyle is a contributing factor. All of these diseases appear to be directly related to the degree of acculturation or adaptation to a southern diet and lifestyle. (Indian and Northern Affairs Canada, 2009, p. 16)

In the context of the historical relationship between the Canadian federal government and Northern Indigenous people, insisting that nutrition-related diseases such as diabetes are “lifestyle disease directly related to [the] adaption to a southern diet” locates Indigenous peoples as victims of an inability to adapt. Not only does this passage make invisible the many factors that structure food

'choices' in Northern communities, it also locates genuine understanding and concern for the nature and scale of diseases such as diabetes firmly within "health authorities" (Indian and Northern Affairs Canada, 2009, p. 16). Scientific rhetoric and evolutionary terminology are evoked in terms such as "acculturation or adaption," although no references are made and no studies are cited. Rather, the case rests entirely upon the assumed epistemic authority of scientifically sounding language.

This focus on the evolutionary and the anthropologic makes community-based accounts of these relations or Indigenous perspectives appear unnecessary if one wishes to understand the true source of ill-health in the North. The narrative told of ill-health in the North thus becomes an evolutionary tale in which Northern Indigenous peoples do not have the ability to adapt to the modern world (read: whiteness), and are therefore inherently fragile and prone to sickness (read: because of their Indianness). Reinforcing a wider ideological narrative, this kind of storytelling further de-historicises the issue of First Nations' health and reifies nutrition-related illnesses as a problem rooted in evolution, adaption, and science rather than in history, colonialism, and capitalism. Speaking of 'Indians' not as having health problems *but as constituting the health problem* is the primary way in which crises of community wellness can be discussed without any critical analysis of power, and allows settlers to absolve themselves of any guilt associated with further and deeper interventionist and colonialist projects in Indigenous communities.

Not only do these examples of the dominant discourse preclude the historical context of Indigenous peoples' health in the North, they locate the pathology of the problem within an assumed 'feast-or-famine' pre-history of Indigenous peoples. Such total claims of knowledge over Indigenous health are not scientific arguments. Rather, they constitute a wider ideological process and system of belief whereby colonial meanings are made and popular consent is manufactured. Still further, this obfuscation of Canadian colonial realities fosters the racist and racialising assumption that Indigenous peoples are fundamentally different from and lesser than white people. More prone to disease and less capable of living in the modern world, Indigenous people are constructed in this dominant discourse as especially frail beings—inevitably and always in reference to their European-Canadian counterparts. Ultimately, health crises in remote-access First Nations communities become reimagined as a series of irresponsible lifestyle decisions made by an ignorant people who are naturally predisposed to diseases and ill-fitted to survive in the modern world alongside their white settler counterparts. Seen as a risk category as well as an embodied evolutionary pathology, Indianness can never truly be transferred into whiteness. Indianness, in this schema, is that which confounds the settler colonial mission of civilising savagery through projects of humanitarianism and development, and 'Indians' are those "others who threaten the fiscal well-being or social security of the nation" and stand in the way of western civil progress" (Goldberg, 2009, p. 332).

Conclusion

*Take up the White Man's burden--
The savage wars of peace--
Fill full the mouth of Famine*

*And bid the sickness cease;
And when your goal is nearest
The end for others sought,
Watch sloth and heathen Folly
Bring all your hopes to nought.*
(Rudyard Kipling, 1899)

Reading the above stanza of Kipling's infamous "White Man's Burden" not only demonstrates the disturbing continuity of a western mythology surrounding colonialism and hunger, but also the way in which the colonised have always been blamed for the violence of their colonisers. Terms such as 'adaption' and 'acculturation' are used to construct Indianness as a pathological and uncivilised social category in an age when scientists can no longer use explicitly racially-based explanations to rationalise the morbidity and mortality of disease in a certain segment of the population (Duster, 1995; Montoya, 2011). The idea that Indigenous people are fundamentally and inescapably sick is clearly what characterises this wider relational discourse wherein Canadian citizens and state institutions are seen as vectors of health and well-being in Northern First Nations communities and Indigenous peoples are seen as impediments to progress.

As the history of the Family Allowance program, FMP, and NNC demonstrates, however, this colonial mythology hides the fact that illness and nutrition-related diseases in Indigenous spaces are largely a function of development schemas such as food subsidy programs and education initiatives. Already dispossessed of land and relocated to static reserves, Indigenous peoples were either criminalised for pursuing land-based hunting practices, or prevented from doing so as a consequence of resource 'development' and industrial pollution (Duhaime et al., 2004). What is worse, the poverty that characterises many First Nations' lives in reserve communities is effaced by a dominant government discourse of poor lifestyle choices and unlucky evolutionary histories. This ensures that Indigenous people are made to suffer the additional insult of being told by the federal state that the source of their suffering is their Indianness. Correspondingly, this nation-making narrative also encourages Canadian citizens to understand their own well-being (or whiteness) as a product of their evolutionary superiority, or non-Indianness. Important for our purposes is the way in which this relational discourse functions to reinscribe a settler colonial relationship of dependence and benevolence while at the same time suggesting that the 'save the savage' discourse of a residential school era has long since faded into Canadian history as a "sad chapter" (Harper, 2008).

We believe that this reproduction by the federal government of a desire to educate, civilise, and modernise Indigenous peoples is sharply critiqued and neatly defined by Byrd when she writes that "'Indianness starts, stops, and reboots the colonialist discourses" of settler states (2011, p. 228). In this manner, we can come to see the attempted transfer of Indianness into whiteness through food subsidy programs and education initiatives as manifestations of a very violent and deeply ambivalent logic of settler colonialism in Canada that endlessly wages 'savage wars of peace.' Of course, when these 'savage wars of peace' (such as the FMP and NNC) fail to produce civil progress in colonised spaces, the settler state readily blames the 'sloth and heathen folly' (read: 'lifestyle choices' and 'poor dietary decisions') of Indians. Significantly, these violent contradictions and colonial relationships persist at the time writing—as

widely circulated and free-floating ideas, as contemporary institutional structures, *and* as ongoing experiences or events of genocide.

Author Note

Kristin Burnett is an Associate Professor in the Department of Indigenous Learning at Lakehead University. She is the author of *Taking Medicine: Women's Healing Work and Colonial Contact in Southern Alberta, 1880-1930*. Her current research looks at the relationships between health, food sovereignty, and colonialism in Northern Indigenous communities. Email: kburnett@lakeheadu.ca

Travis Hay is a doctoral student at York University in the Department of History. His research fuses historical methodologies with critical race theory in order to challenge dominant narratives of Canadian development and postcoloniality. Email: thay@lakeheadu.ca

Lori Chambers is a Professor in the Department of Women's Studies at Lakehead University. She is the author of *Married Women and Property Law in Victorian Ontario, Misconceptions: Unmarried Mothers and the Ontario Children of Unmarried Parents Act*, and numerous historical and legal articles. Email: lchambers2@lakeheadu.ca

Acknowledgements

We would like to acknowledge the kindness, generosity, and patience shown to us by the community members who made this project possible. In all respects, the broader context of this paper and its field of study was made possible by and seeks to remain responsible to these community members for whom the violence discussed in this paper is a day-to-day reality.

References

- Aboriginal Affairs and Northern Development Canada. (2010). "Changes to the List of Items Eligible for Shipment." Retrieved from <http://www.aadncandc.gc.ca/eng/1100100015868/1100100015870>
- Adams, C. (1990). *The Sexual Politics of Meat: A Feminist-Vegetarian Political Theory*. New York: Continuum Publishing.
- Agamben, G. (2008). *State of Exception*. Trans. K. Attel. Chicago: University of Chicago Press.
- Bannerji, H. (2000). *The Dark Side of the Nation: Essays on Multiculturalism, Nationalism, and Gender*. Toronto: Canadian Scholars Press.
- Bartlett, L. C. (n.d.) Memo—Translation of Directions for Feeding of Indian Babies. RG29, file 2989, part 1. Department of National Health and Welfare. LAC.
- Bhabha, H. (1994). Remembering Fanon: Self, Psyche, and the Colonial Condition. In L. Chrisman & P. Williams (Eds.), *Colonial Discourse and Postcolonial Theory* (pp. 112-124). New York: Columbia University Press.

- Blake, R. (2009). *From Rights to Needs: A History of Family Allowances in Canada, 1929-1992*. Vancouver: University of British Columbia.
- Burlington. (2013). "The Burlington Story." Burlington: City of Burlington. Retrieved from <http://cms.burlington.ca/Page12843.aspx#.VKYSGyfEHR0>
- Byrd, J. (2002). *Colonialism's Cacophony: Natives and Arrivants at the Limits of Postcolonial Theory*. Iowa City: University of Iowa Press.
- . (2011). *The Transit of Empire: Indigenous Critiques of Colonialism*. Minneapolis: University of Minnesota Press.
- Canadian Department of Mines and Resources. (1942). *Annual Report of the Indian Affairs Branch*. Retrieved from <http://www.collectionscanada.gc.ca/databases/indianaffairs/index-e.html>
- . (1946). *Annual Report of the Indian Affairs Branch*. Retrieved from <http://www.collectionscanada.gc.ca/databases/indianaffairs/index-e.html>
- . (1949). *Annual Report of the Indian Affairs Branch*. Retrieved from <http://www.collectionscanada.gc.ca/databases/indianaffairs/index-e.html>
- Canadian Diabetes Association. (2011, February). "Just the Basics." Pamphlet. <http://www.hc-sc.gc.ca/ahc-asc/activit/marketoc/camp/adi-ida-eng.php>
- Carter, S. (1993). *Lost Harvests: Prairie Indian Reserve Farmers and Government Policy*. Montreal: McGill-Queen's University Press.
- . (1997). *Capturing Women: The Manipulation of Cultural Imagery in Canada's Prairie West*. Montreal: McGill-Queen's University Press.
- Comacchio, A. (1998). *Nations are Built of Babies: Saving Ontario's Mothers and Children, 1900-1940*. Montreal: McGill-Queen's University Press.
- Dargo, Graeme. (2009). *Foodmail Program Review: Findings and Recommendations of the Minister's Special Representative*. Ottawa: Dargo and Associates Ltd.
- Dialogos Education Consultants Inc. (2004a). *Nutrition and Food Security in Kangiqsujaq, Nunavik: Baseline Survey for the Food Mail Pilot Project*. Ottawa: Indian and Northern Affairs.
- . (2004b). *Nutrition and Food Security in Kugaaruk, Nunavut: Baseline Survey for the Food Mail Pilot Project*. Ottawa: Indian and Northern Affairs.
- Duffield, M. (2001). *Global Governance and the New Wars: The Merging of Development and Security*. New York: Zed Books.
- . (2007). *Development, Security, and Unending War: Governing the World of Peoples*. Cambridge: Polity Publishers.
- Duhaime, G., Myers, H., & Powell, S. (2004). Setting the Table for Food Security: Policy Impacts in Nunavut. *The Canadian Journal of Native Studies*, 24(2), 425-445.
- Duster, T. (1995). *Backdoor to Eugenics*. New York: Routledge Publishing.
- EatRight Ontario. (2013). *Aboriginal People Can Reduce Their Risk for Developing Type 2 Diabetes*. Retrieved from <http://www.eatrightontario.ca/en/Articles/Aboriginal-Health/Aboriginal-people-can-reduce-their-risk-for-develo.aspx#.UIDh7SSMWt8>
- Fassin, D., & Pandolfi, M. (2010). Introduction: Military and Humanitarian Government in the Age of Intervention. In D. Fassin & M. Pandolfi (Eds.), *Contemporary States of Emergency: The Politics of Military and Humanitarian Interventions* (pp. 9-27). New York: Zone Books.
- Goldberg, D. T. (2009). *The Threat of Race: Reflections on Racial Neoliberalism*. Malden, MA: Wiley-Blackwell.
- Grier, S., & Majid, K. (2010). The Food Mail Program: 'When Figs Fly:' Dispatching Access and Affordability to Healthy Food. *Social Marketing Quarterly*, 16(3), 79-85.

- Gulig, A. (2003). 'We Beg the Government': Native People and Game Regulation in Northern Saskatchewan, 1900-1940. *Prairie Forum*, 28(1), 81-98.
- Harper, S. (2008). "Statement of Apology to Former Students of Indian Residential Schools." Retrieved from <http://www.aadnc-aandc.gc.ca/eng/1100100015644/1100100015649>
- Health Canada. (2000). *Food and Nutrition Surveillance in Canada: An Environment Scan*. Ottawa: Health Canada.
- . (2008). "You Are At Risk!" Aboriginal Diabetes Initiative. Retrieved from http://www.hc-sc.gc.ca/fniah-spnia/alt_formats/pdf/pubs/diseases-maladies/diabete/diabete2-eng.pdf
- . (2013). "Drinking Water and Waste Water": First Nations and Inuit Health. Retrieved from http://www.hc-sc.gc.ca/fniah-spnia/promotion/public-publique/water-eau-eng.php#how_many
- Howard-Wagner, D. (2010). From Denial to Emergency: Governing Indigenous Communities in Australia. In D. Fassin & M. Pandolfi (Eds.), *Contemporary States of Emergency: The Politics of Military and Humanitarian Interventions* (pp. 217-240). New York: Zone Books.
- Iacovetta, F., & Korinek, V. (2004). Jell-O Salsads, One-Stop Shopping, and Maria the Homemaker: The Gender Politics of Food. In M. Epp, F. Iacovetta & F. Swyripa (Eds.), *Sisters or Strangers?: Immigrant, Ethnic, and Racialized Women in Canadian History* (pp. 190-232). Toronto: University of Toronto Press.
- Indian and Northern Affairs Canada. (2009). *Food Mail Review: Interim Report*. Devolution and Territorial Relations Branch.
- Innis, H. (1999). *The Fur Trade in Canada: An Introduction to Canadian Economic History* (2nd ed.). Toronto: University of Toronto Press.
- Isaki, B. (2011). HB 645, Settler Sexuality, and the Politics of Local Asian Domesticity in Hawai'i. *Settler Colonial Studies*, 1(2), 82-102.
- Johnson, H. V. [Medical Superintendent, Fort Alexander Indian Hospital]. (1957, August 29). Letter to H.J. Wood [Regional Superintendent Indian and Northern Health Services. RG29, file 2989, part 1-29. Department of National Health and Welfare. LAC.
- Kelm, M. (2005). Diagnosing the Discursive Indian: Medicine, Gender, and the Dying Race. *Ethnohistory*, 52(2), 371-406.
- Krech III, S. (Ed.). (1986). *The Subarctic Fur Trade: Native and Social Economic Adaptions*. Vancouver: University of British Columbia Press.
- LaRoque, E. (2010). *When the Other is Me: Native Resistance Discourse, 1850-1990*. Winnipeg: University of Manitoba Press.
- Lawrence, H., Romanetz M., Rutherford L., Cappel L., Binguis, D., & Rogers, J. (2004). Oral Health of Aboriginal PreSchool Children in Northern Ontario. *PROBE*, 38(4), 172-90.
- Lewis, H. W. [Regional Superintendent for the Eastern Arctic]. (1947, October 23). Letter to Percy Moore [Head of Medical Services Branch, Indian Affairs. RG29, file 2989, part 1. Department of National Health and Welfare. LAC.
- MacPherson, D., & Rabb, D. (2011). *Indian from the Inside: Native American Philosophy and Cultural Renewal*. North Carolina: McFarland and Company Publishing.
- Memmi, A. (1991). *The Colonizer and the Colonized*. Boston: Beacon Press.
- Montoya, M. (2011). *Making the Mexican Diabetic: Race, Science, and the Genetics of Inequality*. Berkeley: University of California.
- Moore, P. (1945, October 27). "Indian Affairs List of Special Food and Clothing,

- Family Allowances Act." RG 29, Vol. 973, File 388-6-1. Department of National Health and Welfare. LAC.
- . (1947, April 2). "To All Mothers with Small Children." RG29, File 2989, part 1. Department of National Health and Welfare. LAC.
- Morgensen, S. L. (2011). The Biopolitics of Settler Colonialism: Right Here, Right Now. *Settler Colonial Studies*, 1(1), 52-76.
- Mosby, I. (2012). Making and Breaking Canada's Food Rules: Science, the State and the Government of Nutrition, 1942-1975. In F. Iacovetta (Ed.), *Edible Histories Cultural Politics: Towards a Canadian Food History* (pp. 409-32). Toronto: University of Toronto Press.
- . (2013). Administering Colonial Science: Nutrition Research and Human Biomedical Experimentation in Aboriginal Communities and Residential Schools, 1942-1952. *Histoire sociale/Social History*, 46(91), 145-172.
- Nathoo, T., & Ostry, A. (2009). *The One Best Way?: Breastfeeding History, Politics, and Policy in Canada*. Waterloo: Wilfrid Laurier University Press.
- Native Welfare. (n.d.) Chart Listing Pabulum Purchases at Various Forts. RG7 box 1, file 1764. Northern Stores Department. Hudson's Bay Company Archives (HBCA).
- Perry, A. (2001). *On the Edge of Empire: Gender, Race, and the Making of British Columbia, 1849-1871*. Toronto: University of Toronto Press.
- Preston, J. (2013). Neoliberal Settler Colonialism, Canada and the Tar Sands. *Race & Class*, 55(2), 42-59.
- Ray, A. (1974). *Indians in the Fur Trade: Their Role as Trappers, Hunters, and Middlemen in the Lands Southwest of the Hudson's Bay*. Toronto: University of Toronto Press.
- Razack, S. (2002). When Place Becomes Race. In S. Razack (Ed.), *Race, Space and the Law: Unmapping a White Settler Society* (pp. 1-20). Toronto: Between the Lines.
- Smith, A. (2005). *Conquest: Sexual Violence and the American Indian Genocide*. Cambridge, MA: South End Press.
- . (2011). "Sexual Violence and American Indian Genocide." Retrieved from <http://www.youtube.com/watch?v=Neg-RIbi764>
- Stoler, A. (2002). State Racism and the Education of Desire: A Colonial Reading of Foucault. In W. Woodward, P. Hayes & G. Minkley (Eds.), *Deep Histories: Gender and Colonialism in South Africa* (pp. 3-26). New York: Editions Rodopi.
- Tester, F. J., & Kulchyski, P. (1994). *Taammarniit (Mistakes): Inuit Relocatin in the Eastern Arctic, 1939-1963*. Vancouver: University of British Columbia Press.
- Thobani, S. (2007). *Exalted Subjects: Studies in the Making of Race and Nation and Canada*. Toronto: University of Toronto.
- Tisdall, F. F. (1945, December 5). Letter to Percy Moore. RG29, file 2989, part 1. Department of National Health and Welfare. LAC.
- Tough, F. (1995). Introduction to Documents: Indian Hunting Rights, Natural Resources, Transfer Agreements, and Legal Opinions from the Department of Justice. *Native Studies Review*, 10(2), 121-149.
- Veracini, L. (2010). *Settler Colonialism: A Theoretical Overview*. New York: Palgrave MacMillan Publishing.
- Verma, S. (2000, May 4). Ottawa Told to Cut Native Food Prices; National Chief Says Reserve Conditions a Crisis. *Toronto Star*.
- Wolfe, P. (2006). Settler Colonialism and the Elimination of the Native. *The Journal of Genocide Research*, 8(4), 387-409.