

Structural Violence in Unexpected Indigenous Police Custody Deaths; Canada & Australia

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ABSTRACT

The police incarceration for petty offences like intoxication includes many instances where missed medical conditions have resulted in unexpected deaths. I argue through exploratory research Indigenous cases, primarily from no-fault, no-blame Canadian and Australian Inquests that the attribution of the ‘drunken Indian’ trope results in cursory inspections of prisoners that is structurally differential care than mainstream society. This is only preliminary inductive logic. I treat these cases as latent structural violence. I peel away the layers of the onion to posit how colonial reasoning such as the ‘drunk Indian’, the ‘noble savage’, Said’s Orientalism, social Darwinism, and Eugenics have a role in police inhumanity. These assimilationist colonial constructs are confounded by police work’s normal stresses. Police officers should help facilitate individual and community Indigenous self-determination in order to break these cycles.

Keywords; ‘drunken Indian’, ‘noble savage’, Orientalism, Darwinism, Eugenics, social denial, maleficence

INTRODUCTION

Police officers in Canada need to be aware of structural violence when dealing with Indigenous peoples in order to recognise our own blind-spots as officers. Structural violence in this paper, not attributable to one individual, is a form of indirect violence or social injustice that may be manifest or latent repression (Galtung, 1969,1990), overt or subtle (Monchalin, 2016, p. 144-5) found in societal institutions, including the justice system that favours a Eurocentric colonial status quo denying Indigenous people’s reaching their full human potential. Sagamok-Anishnawbek 1st Nation’s- Peter Menzies (2007, p.373) cites how “many forms of violence against Aboriginal people are structural or implicit and so may remain hidden in individual accounts.” Menzies argues “Rather

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than pathologizing the individual, as is often done, I would argue that these indicators should be viewed historically and in the context of their oppressed status as Aboriginal men.” This paper attempts to move away from police pathologising the prisoner by exploring root causes. Victim-blaming or (Gray, 2016, p. 81) “psycho-centrism diagnoses social problems and human struggles as innate pathologies of the ‘individual,’ who is held responsible for health and illness and for success and failure in the world.” One of the metrics for structural violence is “differential morbidity and mortality” (Galtung, 1969, p. 177) arising out of being deprived opportunity due to structural inequality. How can police officers recognise the latent structural aspects in the justice system or the ‘Blind Justice’ (Maracle, 2015) towards Indigenous to mitigate inequality. My research is exploratory using Indigenous fatality case studies with nexus to police operations that unearth the differential structures with the marginalised. I use the term Indigenous, as does TCPS2 (2018) research ethics, for simplicity to span categories of First Nations, Aboriginal, Aborigine, Indian, Metis, and Inuit, or otherwise referenced as the term used in a specific period in history (Australia used Aborigine in older documents), recognising the great diversity across these peoples. This is more of a moral examination than the definitional exactness that I would need in a legal argument. I start with my own positionality, recognising my subjectivity and trace some historical developments and ideologies constructing the colonial narrative before using mortality metrics where Galtung (1969) posits differences exist. I then close with how to move forward together with Indigenous peoples in the justice system. The 2017 Yorta-Yorta woman, Ms Day’s death in Australia, as a perfect storm of factors is leading to reforms that should become a template for Canada on intoxication interdictions. I delimit cases of direct violence or suicide that also involves latent colonial factors to focus on the unexpected medical deaths misdiagnosed from the drunken Indian and other attributions.

ETHICS & DATA

The ethics of this research are from using public access documents only and by adopting the Coroner’s motto of ‘speaking for the dead’, looking ahead to preventing future deaths. Justice is served by open

government and transparency. To that end I acknowledge the Province of Alberta for its open justice initiative (Alberta, n.d.), in which I can find citizen casualties from police operations going back to the late 1990's. This holds the Alberta governmental principle of a culture of being open by design and by being open by default. I am partial to Inquest reports as they are no-fault, no-blame, inquisitorial proceedings, and insulated from civil and criminal liability. Australia publishes them for all jurisdictions and include more social history. I have read Chapter 9 (Canada) of the Tri-Council Policy Statement (TCPS2,2018) for ethics governing research with Indigenous peoples, read the Australian Royal Commission into Aboriginal Deaths in Custody (RCIADIC) website on consideration for families, and the 14 ethics principles from the 2012 Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS). I recognise I am not doing; site or field research, videos, interviews, collecting samples, or storing and using sensitive information. This research stems from two progressive curriculum Indigenous courses, PD302 & PD402 at Wilfrid Laurier University under Indigenous scholar Lisa Monchalin (2016) to the ends of learning for police officer students. My cases are taken from a larger data base of my purposive sampling of non-coded 800 plus police operations (Canada, UK, Australia, NZ) related citizen deaths (firearms& other force, police pursuits, custody, etc.) entered into a keyword or phrase searchable Qiqqa© program. I observed Indigenous deaths were the overwhelming majority of missed cranial injury deaths relative to other populations, as a presumptive observation begging analysis.

DRUNKEN INDIAN, NOBLE SAVAGE, ORIENTALISM

My own positionality is in having 39 years' experience as a police officer in Canada which began with a narrower law and order approach, quick to attribute unlawful actions to the offender's character, or as Gray (2016) describes- psycho-centrism, the "human deficit model while simultaneously obscuring societal deficits". In the late 1980's I moved from an eight-officer northern Saskatchewan Royal Canadian Mounted Police (RCMP) detachment to a 200-officer police station in a southern Ontario municipal police service. Both the eight and the 200-officer stations reached about 1900 prisoners a year with the 8-officer detachment with only about 5% less. The eight-officer detachment was remote, with less social agencies, and having a harsh climate that necessitated intoxicated people found outside being detained. Was the high number of prisoners in the north in the 1980's a 'drunken Indian' attribution as part of a colonial status quo? Where did that narrative begin?

One uncorrupted by civilisation 'noble savage' inaccurate depiction of the Indigenous comes from Archie Bellamy or GreyOwl (1932, p. 220-1) who posits;

the future hold nothing for him and they live in days gone by.... than that he should be thrown into the grinding wheels of the mill of modernity, to be spewed out as nondescript, undistinguishable from the mediocrity that surrounds him, a reproach to the memory of a noble race.

This construct of the 'noble savage' existing in the past assumes an eventual demise. Loh (2015, p. 13) explored all manners of art and media finding Indigenous peoples depicted as savages contrasted against the civilised ways of western colonisers. John Ralston Saul argues we have alienating ourselves from our aboriginal identity (Potter, 2009) and two narrative existing-the romantic being of the pure and noble savage whom realists alternately view as corrupt and ignoble. Ellingson (2012, p. 220-232) finds all savage discourse towards the "enterprise of colonial expansion and domination" creating a polarity between savage and

domesticated or civilised. The structural basis for Ellingson (2012, p. 223) arising out of the Monarchy and religion is the “unquestioned legitimacy of the colonial system, within which ‘native inhabitants’ were guaranteed ‘protection in the enjoyment of their civil rights’ only insofar as they submitted themselves to subjection by the system.” In Queensland Australia, beginning with 1897 Aboriginal protection laws (Holland, 2013, p. ii), then to the interwar period Holland argues;

a ‘doomed race’ theory became a means of masking the racism existing in society against the Indigenous people and allowed governments to remove and dispossess Aborigines of their traditional lands without recompense or questions from whites seeking to capitalise on the economic fortunes unoccupied land offered.

Holland also cites a 1953 Territories Federal Minister, Paul Hasluck seeing post-European contact Aboriginal as “inherently flawed, fragile and basically worthless, producing only illness, disease, drunkenness, filth and degeneracy in the thousands of degraded and depressed people who crouch on rubbish heaps throughout the whole of this continent (pp. 108-9).”

Related to the noble-savage, dying-race discourse of polarity is the theme of Orientalism (Said, 1979) where the Eurocentric validates its own advanced civilisational status comparative to the primitive far east in self-other, us-them, towards our western self-identity being nurtured by the perceived backwardness of the other.

Galtung (1990) later included cultural violence to direct and indirect violence, with structural violence becoming “a self-fulfilling prophesy: people become debased by being exploited, and they are exploited because they are seen as debased, dehumanized” (p. 298) in a self-other dynamic. This is the structural lens for Orientalism. Said (1979, p. 207) posits the far east Oriental nations were viewed in a biological determinism and moral political admonishment framework, similar to how marginalized European people in categories of backward, degenerate, uncivilised, insane, delinquent, poor, and even women were regarded.

This Said's Orientalism framework of the west progressive civilisation versus the far east backward civilisation, based on western dominance and superiority is applied to the Indigenous by Monchalin (2016, p. 73) in how the embedded hegemony and colonial discourse in western research and writing leads to the presumption of Europe's dominance. The Said (1979) othering distinctions of 'Us & Them' can also be a default mentality for police officers taking the moral high ground for having agency over the law relative to character attributions made of the offender. Social Darwinism comes into play in the colonial analysis.

SOCIAL DARWINISM & EUGENICS

Charles Darwin's *Origin of Species* in 1859 is an axiom in how it changed theological narratives of creation to evolutionary biology, natural selection, and survival of the fittest. Social Darwinism emerged with ethnocentrism and academic white-washing of racism towards primitive cultures being inferior according to Indigenous Sociologist Kathleen Butler (2016). Butler argues for Indigenous teaching methodologies in the classroom. Darwin expected Aborigine extinction as a consequence of a stronger variety of man (British) meeting a weaker (Butler, 2016, p. 20). Historian Margaret MacMillan (2013) argues that in the declines of Empires and colonial competition prior to WW1 shared assumption from Darwin's theory of evolution fueled Social Darwinist's (p. 264-5) wanting to "explain the rise and disappearances of different societies with the help of such concepts as natural selection." Macmillan posits social Darwinist thought is one contributor to powers going into WW1 as a survival of the fittest by Nation. Racialised theories were reinforced with Winston Churchill an honorary patron of the 1912 Eugenics Conference, as was the President of Harvard.

Eugenics, as a science, became a monster in Nazi Germany and also existed in Canada such as the 1928 Alberta Sexual Sterilisation Act or a similar BC Act in 1933. Professor Karen Stote's (2012) research of official documents and case data finds disproportionate sterilisation of Indigenous women in Eugenics ideologies in Alberta and elsewhere with only cursory patient consents. These practices existed until the sterilisation laws were repealed in 1970. Indigenous women were arbitrarily labelled as mentally unfit or defectives. The descriptors also included being

promiscuous and for illegitimate pregnancy's which ignores women's own victimisation. Stote found some cases were politically based to reduce the number of impoverished people requiring government assistance (p. 125). A class action lawsuit on Indigenous sterilisation is currently before Saskatchewan Court of Queen's Bench (Martin, 2018) and Professor Stote is expected to be an expert witness. The American Indian Health Service also performed unrequested and unnecessary sterilizations with Indigenous (and other marginalised) women and children in the 1970's for reasons that were "economic and social in nature" by white doctors "who believed they were helping society by limiting the number of births in low-income, minority families" (Lawrence, 2000, p. 410). This Eugenics-based sterilisation policy in Canada, whether intended or not, was structural violence by asserting white authority as part of overall Indian policy. In Queensland Australia in the interwar period, sterilisation was considered for the Aboriginal (Holland, 2013, p. 104), as well as worries about the purity of our blood and half-caste evil (p. 123). The Queensland Chief Protector for the Aboriginal, John Bleakley wrote in 1929, as paraphrased, of worry over cross-breeds inheriting the intelligence and tastes of the whites, to be "then nullified by the retarded instincts of the blacks", thus unable to be a steady white or contented black (Holland, 2013, p.95). In Turkey after WW1, Eugenics emerged in the new upper class post-Ottoman rule who wanted to move Turkey forward "as a way to build a professional class 'fit' to rule the country" (Güvenç-Salgirli, 2011, p. 281), to prove that "Turks were as capable of modernization as the Europeans" (p. 284). Cemil Topuzlu, a Surgeon and twice Mayor of Istanbul argued for forced sterilisation for defectives and degenerates (p. 283). Social diseases such as syphilis and gonorrhoea were seen as positive factors for "winnowed the degenerate (p. 294)", especially if sterilisation was a disease side effect. Related to this is the 2012 Inquiry media statement by Commissioner Wally Oppal into British Columbia's missing and murdered Indigenous (CBC, 2012) that "these women were vulnerable; they were treated as throwaways."

Some police officer's default to the Orientalist polarity of Us & Them in Said's (1979) framework, as seen in good-guys versus bad-guys discourse and in framing a thin blue line between order and chaos. Other marginalised can get called 'white trash', as well as police calls involving

misadventure from stupid actions generating dark humour Darwinian backstage comments by officers. I use some recent history death cases to question structural violence, taking Galtung's (1969) suggestion that mortality rates are one metric. This is exploratory research only at this point in which the police are part of a structure. Razack (2011) posits these types of untimely death get framed as timely in colonialism. I turn to my highly summarised cases.

EXPLORATORY RESEARCH CASES

Intoxication arrest is designed in Canada for peoples own protection and safety, usually under a Provincial, non-criminal law. It usually involves a citation not unlike a traffic offence. The moral obligation of police in these detentions deserves analysis.

(1) *Callous indifference* by the arresting officer by blindly following orders (Razack, 2015, p. 29-52) is one conclusion made by Commissioner William Davies in the December 1998 Vancouver British Columbia hypothermia death of Frank Paul in an alleyway outside a detoxification centre where he was left by police. Frank had been released from the drunk tank a short time before, then re-arrested, with a senior officer declining to further detain Frank, telling the officer to drop him off near the detox. The Inquiry Commissioner had accepted psychiatric evidence that “systems can govern an individual’s responses and cause him or her to behave unethically under pressure.” This Frank Paul Inquiry came about in part by lobbying of Coast Salish grandmother Kat Norris and her work to bring culture and tradition back into Indigenous communities (Norris, 2017).

(2) Agnes Sutherland, age 62, from Fort Albany, Ontario had been arrested for threats in Timmins, ON. She died on Sunday, Feb. 4, 2018 of complications of end-stage diabetic nephropathy in a woman with ischemic heart disease. Agnes’s health required palliative care, she refused dialysis, and she was bounced around medical/social services prior (hospital to shelter, to police). She wanted go home to Fort Albany which was not happening for her (Loparco, 2018; Grech, 2019). The Nishnawbe-Aski Nation (NAN, 2018) was concerned whether Agnes had been treated roughly. She is a “a survivor of the notorious St. Anne's residential school”

according to her son Glen Sutherland (Perkel, 2018), who questions why she was allowed to refuse dialysis.

(3) Deborah Chrisjohn died in September 2016 in police custody, with an officer being found criminally negligent over failures in her care. London, Ontario police had responded to a disturbance/intoxicated person call. Judge Pomerance (2019) writes “She had ingested a toxic level of methamphetamine resulting in a heart attack. The tragedy of her death is compounded by the fact that it might have been prevented. Timely medical intervention might well have saved her life. Regrettably, that did not occur.”

(4) Wilfred Emile in October 2015 was detained for public intoxication in Fort Smith, Northwest Territories and became unresponsive, then going to palliative care and dying of chronic obstructive pulmonary disease (Menard, 2016). He was not taken to the medical centre until experiencing medical distress in cells.

(5) Earnest Shaun Moosomin died in Surrey BC August 2014. He was found on the Skytrain transit floor and thought to be intoxicated. The issues emerging in this complication of overdose from methamphetamine/heroin death were that an ambulance was not called at first arrest, that he had been staying in an unsuitable unregulated recovery house where illicit drug activity occurred, and that the application processes for recovery supports too complex. The Inquest also noted the need for services requiring cultural safety for Earnest’s background of all his siblings being in the child welfare system and his mother traumatised from a residential school, as well the need for First Nations representatives on Health Boards (Barnard, 2015).

(6) William Leonard Ballantyne (Sask, 2014) died November 2012 in Prince Albert Saskatchewan of Acetaminophen overdose. Police had removed him from the hospital (he was there for medical reasons) on behalf of hospital security for some disturbance. William then had breathing difficulty in cells. No medical clearance was obtained from a medical practitioner to remove him from hospital in the first instance (Pilon, 2012). The family got no answers at the time.

(7) Paul Kayuruk in October 2012 was found in an unresponsive state at Baker Lake landfill, Nunavut October 14th and taken into custody on the assumption of alcohol intoxication by RCMP. He was taken for medical treatment from cells and found to be suffering a stroke, and also a diabetic, subsequently passing. One Inquest recommendation was for police to challenge assumptions about intoxication (Suramela, 2017).

(8) Raymond Stewart Eagle died in January 2010 in the Northwest Territories from atherosclerotic coronary artery disease, and remote cranial trauma, after found on the road in Yellowknife 3rd August 2006. He was taken to hospital, medically cleared, then taken to RCMP custody where he went comatose. He was in extended care until his death (NWT, 2010). His sister Margaret Eagle hopes that other intoxicated persons who end up in Yellowknife RCMP custody every year will receive better care (CBC, 2011).

(9) Robert Wood (Colli, 2014) died in January 2010 after RCMP custody in Nelson House Manitoba. The death was due to acute cranio-cerebral trauma from a fall or falls. He fell over in public during a drinking binge, a nurse had signed off he was suitable for lodging, he urinated in the police cruiser, was put in the RCMP cells, was falling over again, taken back again to the nursing station, then airlifted to Winnipeg for palliative care. Judge Colli expressed disappointment the family or First Nations did not participate in the Manitoba Inquest. The Inquest also mentions “*government contributions to the malignancy in Aboriginal communities as a factor.*”

(10) Victoria Rose Paul, age 44, died in August 2009 of a stroke while in police custody for intoxication in Truro, Nova Scotia after an arrest outside Warehouse bar with her son Deveron Paul. The subsequent Fatality Inquiry found Truro police failed to provide respect and dignity, failed to appropriately monitor health and provide access to medical service in a timely manner (Mont, 2012, p. 67). Care was not provided until 10 hours after incarceration, and prisoner forms C13-4 for both were incomplete about medical conditions. The Mi’kmaq next of kin perspective is Victoria was *treated callous like a dog, being left on the floor in her own urine*. Deveron Paul testified of being called a “*wagon-burner.*”

(11) Stanley Steven Cardinal died in August 2009 in Kamloops BC after being in police custody of multi-organ failure, cardiac arrest, mixed alcohol/ methadone toxicity. Stanley had been found lying on the ground and ambulance also attended. The Inquest heard from the ICU Physician that he was confident Stanley's condition was survivable if he been brought to the hospital immediately from the scene (Michael, 2010).

(12) Raymond Silverfox, in December 2008 was an inebriated patron at the Whitehorse Salvation Army. He was assessed, but not medically transported by EMS. The Salvation Army, no longer able to care for Raymond resulted in him ending up in RCMP cells, where he was later found unresponsive. The cause of death was found to be Sepsis and Acute Pneumonia (Joannou,2013; CRCC, 2011).

(13) Leon Herman Bighetty dies in Winnipeg, November 2002, believed intoxicated and taken to the Main Street Project detention facility, where 13 hours later on release he was unresponsive. He later died of two subdural hematomas, after 6 days in a coma (Smith, 2005). Was the head injury missed?

(14) Viola Contois died March 2001 of acute ethanol intoxication in a police vehicle while on route from Mafeking to Swan River MB. The Inquest Judge comments "When in doubt, the important lesson of this case is that the police should err on the side of caution and assume a medical emergency" as well as "medical needs of the individual must be given priority over the needs of the police to make an arrest" (Thompson, 2003).

(15) Brian Mark House of Enoch First Nation AB was a diabetic and arrested for public intoxication in September 1999, sleeping in a ditch. He went into distress later in cells, later dying. No alcohol was in his system and his cause of death presumed to be metformin toxicity from his diabetic medication (Rae, 2000).

(16) Steven Spotted Eagle, 57 died Sept 1999 at Siksika AB died of a head injury, skull fracture, and subdural haematoma. He was found unconscious, intoxicated, taken to RCMP by Indigenous officer, not lodged, and Ambulance called to police station right away.

(17) David Gordon Chowace died in July 1994 at Grande Prairie AB of blunt cranial trauma and acute alcohol intoxication. He fell off a

dumpster, was taken to hospital, was intoxicated and diabetic, became belligerent at hospital, and left hospital. RCMP took him to the drunk tank, then David was found unconscious and taken back to hospital (Patterson, 1995).

(18) The November 1990 hypothermia death of intoxicated Neal Stonechild is a case of manifest structural violence. Critics (Monchalin, 2016, p. 261; Razack, 2015, p. 173) explore how Neal was dropped off out of town by Saskatoon police in a practice known to the street culture as the ‘Starlight Tour’. Montchalin (2016) and Razack (2015) voice street culture reports of many other starlight non-fatal cases involving intoxicated Indigenous people.

These Canadian cases are selective to the data in Inquests relevant to my topic. Not all jurisdictions in Canada publish Inquests, and some only publish the manner, cause, and recommendations. Australia better publishes Inquests in all jurisdictions, which cases corroborate the Canadian context.

Table 1: Missed medical conditions, police detentions, Indigenous- from AU Inquests

Name	Death	Cause	Issues
T Day, 55 (HRLC, 2019)	22 Dec 2017 Castlema ine	Massive brain bleed	Arrested on Dec 5 th , died 17 days later. Coroner allowed witnesses and also an expert report on systemic racism-report due mid-2020 -Ambulance chief Stephenson apologizes for “ <i>disrespectful care</i> ” (Wahlquist, 2019)
R Maher (O’Sullivan, 2019)	19 July 2016 Maitlan d AU	Mixed drug toxicity	Arrested for intoxication, died in police cells “ <i>it is dangerous and inappropriate to take the approach that the person will or can ‘sleep it off’</i> ”
P(Kumanjayi) Langdon, age 59 (Cavanagh, 2015)	May 2015 Darwin AU	Large heart-idiopathic dilated cardiomyopathy (probably alcohol related)	Detained paperless arrest scheme “ <i>which encourages the arrest of public drinkers, almost all of whom are Indigenous</i> ” ... “ <i>he was entitled to die in peace, in the comfort of family</i> ”

and friends. In my view, he was entitled to die as a free man”

Asera aka E Young, age 70 Cavanagh, 2018)	30 Mar 2016 Darwin AU	Head trauma	Fell over when police woke up. Police had careless disregard of law “showed little willingness to critically analyse the circumstances”
C Wurrmerli Murrungun, 53 (Cavanagh, 2016)	12Feb 2015 Darwin AU	Left intra cerebral and left subdural haemorrhage	Drinking, fell to ground outside taxi and went limp- “rag doll”, police transported to hospital in cage van as EMS busy – treatment by police and EMS not legal or appropriate
J I DHU (Fogliani, 2016)	August 2014 South Hedland AU	staphylococcal septicaemia and pneumonia from an old injury	Arrested on warrants. “In her final hours she was unable to have the comfort of the presence of her loved ones, and was in the care of a number of police officers who disregarded her welfare and her right to humane and dignified”
D J Phillips (Vicker, 2012)	January 2011 Kalgoorlie AU	seizure consistent alcohol withdrawal to fatal cardiac	Move on Notice & then later an intoxicated arrest “If a person held in custody refuses necessary medication, police are not in a position to compel compliance.”
E Gaykamangu, 37 (Cavanagh, 2003)	Decemb er 2001 Darwin AU	inter-cerebral haemorrhage contributed to by acute alcohol intoxication.	Laying on footpath, Taken into custody to police watch-house. Five hours later on release, was not well and sent to hospital. Died 9 days later. CT scan showed the haemorrhage
D Armstrong, 58 (Brooks, 1999, p.630)	May199 2 Brisbane	suffered a heart attack 12 hrs prior to police	Arrested for drunk- based on past history assumptions- couldn’t walk or communicate, taken to cells and 2 1/2 hours later medical attention sought, no alcohol in her system

M Tomachy, 44 (Brooks, 1999, p. 260)	Nov 1991 Queensl and AU	respiratory failure arising from cerebral necrosis, result of head injury	Arrested public drunk on street after domestic dispute (in a house), found unconscious in cells in morning, comatose for 5 days until her death.
S. J.C. (RCAIDIC, 1998)	March 1986 Mount Gambier AU	died subdural haematoma, mental state due delirium tremens	Epileptic, hallucinating, taken to hospital, cleared, assumed intoxicated, then police detained, but later died. No criticism of police by Inquiry
B.T.L. (RCAIDIC, 1998)	6 June 1985 Tamworth AU	Brain injury from fractured skull outside hotel	Hotel call, ambulance declined to take, injury after leaving hotel? then 7 hours in police cells before taken to hospital, -police gave false evidence
J.P.P. age 17 (RCAIDIC, 1998)	28Sep 1983 Roeburne AU	Closed head injury-subdural haematoma	Fight outside hotel with youths and off duty police. John taken to juvenile lockup, roughed up station yard, put in cells semi-conscious, found dead later
K.E.K. (RCAIDIC, 1998)	March 1983 Royal Adelaide AU	Subdural haematoma	Detained for intoxicated and released from cells early in morning, collapsed on street soon after, police then called to take him from hospital as deemed drunk. Inquiry critical of police and hospital care
F. B. (RCAIDIC, 1998)	Oct 1982 Perth AU	Acute subdural haematoma	Asleep outside police station, presumed drunk, left laying on concrete
C. A. N. age 33 (RCAIDIC, 1998)	August 1982 Dubbo AU	Brain haemorrhage-no police wrongdoing	Shoplifter during 4 -day sentence for not paying fine, in police cells, suspected alcohol withdrawal causing convulsion & collapse
R.N.W. (RCAIDIC, 1998)	April 1981, Perth AU	Skull fracture, subdural haematoma	Found unconscious and treated as drunk <i>“Neglect of prisoner and apparent indifference to the welfare of those in custody...treated with less than humanitarian concern...dereliction of duty”</i>

A. D. (RCAIDIC, 1998)	Decemb er 1980 Broome AU	Respiratory failure due head injury	arrest for drunk when found unconscious, " <i>process of detention contributed to the mechanism of his death</i> "
K. P. (RCAIDIC, 1998)	Novemb er 1980, Alice Springs AU	Subdural haematoma	Detained in police watch house intoxicated. Police care did not meet standard. Price was never conscious at scene or in cells.

POLICE PSYCHE

Cases show structural issues for Indigenous persons, as well as the assumptions about drunk Indians where missed cranial injuries, diabetes, cardiac and other medical conditions mimicking intoxication get missed in the cursory examination. Some of these cases are manifest structural violence involving negligence. Most are latent structural violence. I question to what extent the GrayOwl (1932) 'noble savage' narrative as unable to survive in modernity exists, the Said (1979) Orientalists 'Us & Them' dynamic that feeds the Eurocentric self-image of superiority, and fatalistic social Darwinist / Eugenics philosophies viewing this as a self-correcting problem. Officers in general get detached and fatalistic in surviving in a traumatic job. The police new-recruit idealistic goal of doing good and saving the world gets jaded. Bittner (1970) expresses that;

the taint that attaches to police work refers to the fact that policemen are viewed as the fire it takes to fight fire, that they in the natural course of their duties inflict harm, albeit deserved, and that their very existence attests that the nobler aspirations of mankind do not contain the means necessary to insure survival (p.8).

Sociologist Timmermans (2006, p. 280) explains this taint another way after he did three years participatory social research in the morgue, attending 225 autopsies in a New York Medical Examiner's office. He closes off the book introspective of the research impact on himself of

deaths using Erving Goffman's stigmatisation analysis as well as how the dirty work also taints and isolates the ME's office, with high rates of burnout, turnover, and suicide. I can appreciate that psychological exhaustion from my own policing career, much as a forensics officer, and see the need to consciously separate that exhaustion from prisoner care. The managing order in society can include latent biases towards minimal prisoner care that emerges from burnout, call demands, staffing, time constraint, racialised values, and cynicism of this being- not if, but when, marginalised people will die, possibly harbouring deep down Eugenics thought justifying a survival of fittest differential care model of policing. The Criminologist Bittner's (1967, p. 699) exam of rough justice in skid-row policing finds; "the police use of coercion (is) mainly in the interest of managing situations rather than persons." In Northern Territories AU, 'paperless arrest' or 'catch and release' policies were developed to give police more autonomy and unclutter the Court dockets. The Indigenous debate (Yang, 2015) pitted the punitive, penal and unconstitutional arguments against the argument paperless arrests were just an extension of normal police powers. Some 80 % of 2000 of these paperless arrests were Indigenous detainee's (Davidson, 2015). That AU policy addressed the public place nuisance situation- not the individual's self-determination. Police need to deal with persons from our shared humanity as much as with resolving a specific situation. Indigenous perspectives can help.

SELF-DETERMINATIONS

These Indigenous prisoners died alone as in the case of Fort Albany Cree, Agnes Sutherland, 62 February 2018 death, who required a Hospice. The medical sequelae of antecedent factors would likely trace her demise antecedent factors all stemming back to diabetes. Any differential medical triage of patient care becomes the structural violence. The OHRC (2020), on the two-year anniversary of Agnes Sutherlands death has filed an application with the Human Rights Tribunal alleging discrimination based on Indigenous ancestry by public service providers in Timmins, Ontario (medical, police, ambulatory). The OHRC Commissioner Renu Mandhane states "many people I spoke to linked their deaths to systemic racism and unequal access to essential services." The Melbourne AU 2019 Inquest into the December 22, 2017 death of Yorta-Yorta; Tanya Day has accepted

witnesses and submissions on systemic racism (HRLC, 2019) with the report still pending. Metis Carrie Bourassa (2017) explains why there are 40 people in the room when an Indigenous person passes, family and connections, all praying, with death not as end, but as transition. Agnes Sutherland did not have that. The energy and togetherness are important to the dying and family. Can police officers, who come across people near death as prisoners or other predicament, participate in the collective good energy in this transition? Bourassa also discusses sacred objects and smudging to cleanse yourself before passing. Are these services available proximal to officers working with Indigenous communities? Decades ago, I had seized a medicine pouch from a Salteaux prisoner which I now regret, as there was no need to strip him of his dignity.

Juddah's Place in Oshwegon Ontario lead by Mohawk Dr. Karen Hill (2019) complements traditional medical care. Relational and collaboration with each other and the Creator are aims of the practitioners to peel away colonialism, and address fears from an emotional place. Juddah's Place has tracked the progress of 47 cancer patients on this self-healing part of care that does not rely on pharmaceutical interventions as much as western medicine. Police also can refer clients to Juddah's Place here on its open-door referral's reputation.

In the North-West Territories there is an Indigenous elder led Arctic Indigenous Wellness Foundation (AIWF, 2020) that promotes self-determination and a "sense of urgency among the Elders of the north to pass down their long-standing healing traditions, which are on the brink of extinction." AIWF supports fledgling sobering up facilities in Yellowknife, as well as healing camps. Recovery of self requires a self-determination. Criminal interdiction to accelerate an alcoholic to rock bottom as a wake-up does not help self-determination.

Cree student Janice Alison Makokis (2005) tells of herself learning Cree traditions from her grandmother, a residential school survivor who wanted Janice to have a strong foundation in Cree culture. The insidiousness and cunningly subtle colonial influences were to "walk down the road to assimilation and acculturation" (p. 6) which Janice experienced going to a French and Ukrainian local school. Her identity changed to "experiences of self-hatred, racism and shame of being nehiyaw" as a result

of racist comments and jokes and not being white enough. This led to her self-determination through Cree ancestral teachings, ceremonies, and spiritual transformation to decolonize her Indigenous identity to better contribute to the good of the collective. Makokis relates an Elder saying “self-determination requires self-responsibility, which in ceremony is giving your responsibility over to a higher power.”

Indigenous culture and principles include wholistic theory (Absolon, 2010, p. 76) where there are “reciprocal interconnections of self, individual, family, community, nation, society and creation.” This is also “whole, ecological, cyclical and relational.” Absolon writes holistic theory in practice “means to live and practice *minobimaadsiwin*-a good life.” The medicine wheel is used by Absolon to depict holistic theory. Ancestor knowledge is important and can be achieved “via dreams, ceremonies, vision quests and rituals. Ancestors are there waiting to share their knowledge.”

Interconnectedness is also found in the late spiritual healer Chief Charles Labrador (Marsh, Coholic, Cote-Meek, & Najavits, 2015, p. 5) analogy of ‘two eyed seeing’ where the branches of the trees in the forest all touch and are holding hands. Two eyed seeing would combine western and Indigenous knowledge. Two eyed seeing is a tool Martin (2012) argues to overcome the positivism in health research which sees indigenous knowledge as unscientific. Positive knowledge relies on a natural science’s scientific method and empirical or measurable data. Martin (2012, p. 28) writes “that it has long been recognised by Indigenous peoples that the health of Mother Earth is directly linked to the health of people” in her argument for the interactive harmony, the co-learning, reflexivity, that including indigenous knowledge would contribute to the “very reductionist, narrowly conceived arguments that are born of positivist thought.”

CONCLUSION

My intention in this is to find the vestiges, and cookie crumbs of the past that may exist in our laws or in our self as police officers without our conscious knowledge. I try to use the deaths that do not get the attention of the dramatic events like police shooting, and go after latent data, even

if only exploratory. There is an ordinariness and routine to these cell deaths that if magnified could be seen as a banality or base motive, or no motive at all, that begs inspection as Hannah Arendt (1964) found in the Nazi Eichmann analysis, where Eichmann had an indirect technical ‘forced-emigration’ role as a train’s systems employee, rather than directly in the Nazi death camps. The Philosopher John Rawls (1999. p. 98) on theories of justice discusses the natural duties of individuals to include; “the duty of helping another when he is in need or jeopardy... duty not to harm or injure another; and the duty not to cause unnecessary suffering...duty of mutual aid...duty to do something good for another.” We need to move past callous indifference and genuinely care for those entrusted to us overnight. Police should not be blind to revolving door detentions of vulnerable Indigenous clients that further debase them. Current custody protocols, while improving, do criminalise the intoxication social-problem and afford little progress towards the individual’s self-determination best provided by their own Indigenous culture. Officers have a truth-telling role in the Court. Bychutsky (2017, p. iii) summarises social denial of events and its counter- that of bearing witness with;

Social denial is a socially reproduced blindness in the face of traumatic events and processes. In opposition to social denial is a different social practice, bearing witness. Bearing witness is engaged when society’s actors give voice to those who would otherwise be silent.

Officers can move from social denial which is a form of wilful blindness, to bearing witness in reports, proceedings, and truthful official duties. Malmin (2017) cites a Ruderman Family Foundation study of law enforcement encounters with the disabled that found almost half of people who die at the hands of police are disabled. He describes this as institutional betrayal, a term used to describe wrong doings perpetrated by an institution upon individuals dependent on that institution” (p.904) and how this is maleficence. Doctors have a non-maleficence duty and professionalised police also have this moral duty, as in most of these types

of cases, these clients are like patients and only detained for their own protection. Victoria Australia, after the 2019 Inquest into the 2017 brain bleed death of Yorta-Yorta Tanya Day following intoxication incarceration, has undertaken to decriminalise public drunkenness and replace it with a health-based response (Hennessey, 2019). That type of benchmark reform would put non-maleficence ethics on the officer rather than to solely solving a call situationally. Officers have a duty to serve and protect, to which they should approach as a calling, rather than an inconvenience, no matter how tragic the duty with marginalised becomes. I use mortality as a metric as proposed by Galtung (1969) which here overlaps with health care. The justice system has to work in harmony with the whole of government and community. Indigenous communities need to be in the driver's seat with self-determination in justice. My research found numerous cases where underlying assumptions of the drunken Indigenous might have contributed to missed medical cues whether it be an honest mistake or deviance by the officer. Police do intersect with palliative clients and be sensitive, but in most of these cases I presented, the deaths were preventable. Officers need to be aware of bias and work closer with Indigenous communities. Officers should not be passing moral judgements, or victim-blaming. Lee Maracle's (2015) poem on 'Blind Justice', musing on Prime Minister Stephen Harper's residential school apology, outlines colonial desecrations of the land and people and closes with the lines "I'm not the only one that needs help here. The sharing of my country, with us, with you, defines your humanity. You need us as much as I need you- {I-skutshe'am}". Fate will bring the officer and the Indigenous client together with opportunities of lessons for both officer and the detainee in the encounter.

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