Since the onset of 2020 we have been confronted by COVID-19, a global pandemic that continues to evolve at an accelerated pace in all countries around the world. According to the World Health Organization, COVID-19 is a viral infectious disease of the coronavirus family that was discovered when an outbreak began in Wuhan, China, in December 2019 (WHO, 2020). There is no doubt that we are living in a time that is rife with uncertainty, social distancing, isolation, and fear and there is a critical need to understand how the social determinants of health have an impact on individuals as well as whole communities and nations. José Francisco Cali Tzay (Guatemala), Special Rapporteur on the rights of Indigenous peoples for the United Nations Human Rights Office of the High Commissioner (2020), warns of the impact of COVID-19 on Indigenous peoples worldwide. Indigenous peoples in Canada already have high rates of chronic health conditions such as diabetes and hypertension that, coupled with social factors such as climate change, systemic racism, discrimination, and poverty, could heighten the risk of COVID-19 for many Indigenous peoples.

Canada has a colonial history that has had a devastating impact on Indigenous peoples and I believe that amid COVID-19, addressing the social dimensions of health should be ranked high among priorities for future health policy considerations. This book is part of a COVID-19 ready scholarly response that focuses on gaining a deeper understanding of the social dimensions of health as applied to Indigenous peoples who have been historically underfunded and excluded when it comes to health services, programs, and quality of care. The social dimensions of health, especially during a global pandemic, should indeed also be part of academic institutional responses to working with and supporting Indigenous research initiatives.
Since the final report of the Truth and Reconciliation Commission (TRC) in 2015, the Indigenization of Canadian universities has been high among priorities set by university administration offices. Many post-secondary institutions across the country are now sharing their strategic priorities regarding their Indigenous plans, territorial acknowledgments, and active Indigenous hiring and are striking task forces and committees. Post-secondary institutions across Canada and major funding agencies such as the Social Science and Humanities Research Council (SSHRC), Canadian Institutes of Health Research (CIHR), and Natural Sciences and Engineering Research Council (NSERC) have been responding in various ways to address the TRC’s ninety-four multifaceted Calls to Action. One Call to Action in particular, number sixty-five, is worth noting:

We call upon the federal government, through the Social Sciences and Humanities Research Council, and in collaboration with Aboriginal peoples, post-secondary institutions and educators, and the National Centre for Truth and Reconciliation and its partner institutions, to establish a national research program with multi-year funding to advance understanding of reconciliation. (TRC, 2015, p. 242)

In the past several years, Canadian universities and colleges have been moving forward with research protocols. As well, the SSHRC has summarized how it intends to fund Indigenous research through SSHRC initiatives to support Indigenous research and talent as well as upcoming SSHRC Knowledge Synthesis Grants about Indigenous peoples’ reconciliation (SSHRC, 2016). In fact, Ted Hewitt, president of the SSHRC, has held the position that “social science and humanities scholars and their partners across the country are in a position to facilitate access to knowledge in all of these areas – knowledge properly grounded in relations of respect, diversity and reciprocity between Indigenous and academic communities” (Hewitt, 2016, p. 1). There is currently considerable interest inside and outside the academy in a range of issues associated with decolonizing research methods and Indigenizing health research. Part of the challenge is that the link between the ninety-four Calls to Action of the TRC and research work, especially among non-Indigenous researchers, is still not clear. Indigenous peoples and communities have long experienced exploitation by researchers and to counter that there is increasing focus on participatory action research and decolonizing research processes (Smith, 2006, 2012). As researchers, we must consider that our research practices and
outcomes are “affiliated with mainstream institutions – and irrespective of our personal commitments and intentions – we are located at a nexus of power in the dominant society” (Menzies, 2001, p. 22). This means that applied research methodologies should not remain inaccessible to the people and communities we work with in generating knowledge and outcomes.

As a settler-ally and a sociologist, I have been reflecting on what this means for our research and pedagogical practices and for student learning and how we can better focus our attention on Indigenization and decolonization. I do not think I am alone when I ask, “As a non-Indigenous scholar, how does one move forward with decolonization of research practices and where should I begin?” I wrote this book as a unique scholarly contribution for other researchers, practitioners, and graduate students who may be pondering similar questions about Indigenization and decolonization of their research work. In doing so, I offer a careful and respectful reflection based in many years of my own research experience with Indigenous communities and organizations on how to “unsettle conversations” about research.

The central argument of this book is that state-centric colonial structures exert a form of structural violence on Indigenous peoples because they exercise colonial power over them by legitimizing western ways of thinking about well-being over Indigenous ways of “being well.” This argument is based in evidence-supported research findings. If non-Indigenous researchers are to understand and address health inequalities that exist today for Indigenous peoples, then I suggest that careful consideration is needed about how the ways in which we teach our research practices to students and apply them as practitioners support a colonial way of thinking about and doing social research. We must ask ourselves if what we are doing is derived from colonial praxis. This book is an invitation for non-Indigenous researchers to look at the ways in which everyday research practices, particularly within the social sciences, contribute to the colonization of research practices and data. These practices have caused and continue to cause harm for Indigenous peoples. Non-Indigenous scholars need to start to look at doing research in different ways, which means that this conversation will most likely be uncomfortable for many people but it is through this discomfort that we will gather valuable insights into respect and relational accountability as pathways that open space for Indigenization. I have come to understand that Indigenization is about infusing the academy with Indigenous knowledge and applying decolonial practices through our research work to strip away the colonial
knowledge systems and institutions that prevent Indigenous knowledge from flourishing.

**Relational Accountability**

I am a second-generation immigrant, which means, like the majority of people, a settler on Turtle Island (an Indigenous name for the continent also known as North America). I am an ethnically blended and biracial person of mixed European (Irish/British) and Indian ancestry. My father, grandparents, and ancestors are from the communities of Secunderabad and Hyderabad in central India and, although my father settled on Turtle Island in 1967, several of my relatives still live throughout India. My personal journey of cultural diversity reads more as a story of paradox. At times, I embrace a rich sense of cultural awareness and at other times I suffer from my family’s assimilation processes after their arrival to Canada, including dispossession from their native Hindi language, traditions, and customary clothing and adherence to the anglo-conformity model of mainstream western culture. It seems to me that dominant society has played an instrumental role in telling us who we are and how we should recognize and express our Indian identity. Throughout much of my life, I have internalized racism and negative stereotypes and know what it feels like to be silenced and have social worth assigned by others based on skin colour and ethnic origins. As a blended person, my identity is not inseparable from these experiences but emerges from an intersection of structures of oppression such as my gender, family origins, skin colour, and the tensions experienced through a relational process with various social institutions and other groups along the way.

I feel accountable to my research relationships and the types of research work I have been doing for nearly two decades. I started my research career fresh out of my undergraduate degree in sociology in my first job as a research assistant working at the Population Research Lab at the University of Alberta, and a few years later was delighted to become employed as a researcher and course instructor at Statistics Canada. At this time, I was 25 years old and eager to learn as much as possible about “how to” do good research. It seemed that I was well positioned to learn everything there was to know about all aspects of research design processes, applying mixed methods research, and working with diverse groups of people. This combined academic-government environment seemed like a dream come true for an aspiring early-career researcher at 25 years old because it offered many training opportunities and appeared to me at the time to be an optimal learning
ground. During my tenure (1998 to 2008) with the federal government, I designed and created research courses, managed research services, and collaborated on projects with other key stakeholders in other government departments, academia, and private industry on major research initiatives such as the Data Liberation Initiative, the Education Liaison Program, the Census of Population, and the Gathering Strength Initiative for the Royal Commission on Aboriginal Peoples. In 2000 and again in 2004 I was awarded the Statistics Canada Employee Recognition Award from the Assistant Chief Statistician of Canada for an exceptional and distinguished contribution to the effectiveness of Statistics Canada. I was developing a reputation for myself as a good researcher and gaining accolades within and outside the organization. As a member of the Gathering Strength Initiative I worked in numerous Indigenous communities, teaching people about research design, mostly from a quantitative perspective. I was also involved in Census data collection activities, hiring and managing research teams comprised of hundreds of First Nations staff throughout BC coastal communities, Vancouver Island, and Northern Canada. This journey offered considerable teachings about the myriad of ways of doing good as well as bad research with Indigenous communities. Although I am no longer employed with Statistics Canada, I have been invited to join statistical technical advisory committees for input into shaping existing and emerging survey instruments, to co-chair national Indigenous data conferences, and to manage large-scale data collection operations such as the 2011 Census and National Household Survey.

Since my days as a public servant, my career has shifted and changed considerably and I am thankful for the long-lasting friendships with many colleagues. Much of my research and scholarly work now focuses on working directly with Indigenous peoples, communities, and organizations to co-create knowledge on a diverse range of issues, such as addressing children’s wellness outcomes; advocating for traditional knowledge practice; addressing gendered violence resulting from industrial camps (extractive industries) in the resource development sector in British Columbia that results from a lack of anti-racist, anti-colonial employee training programs and from normalized stereotypes about Indigenous peoples; and addressing gendered violence more generally. My work with Indigenous peoples in Canada has always been based in friendships and familial bonds well established over two decades of work, which has brought me to the writing of this book. I have often wondered why I have felt such ease working with Indigenous peoples in Canada and other nations around the globe. I have been curious about the parallels this may have to my own Indian
ancestry and ethnicity with shared experiences of dispossession, forced relocation, and colonialism and the resultant trauma from these experiences that have directly impacted me and my family. I believe that this has been formative in shaping my identity and my relationships with Indigenous peoples.

**About This Book**

This book is not about Indigenous methodologies; there are many good sources in this area written by qualified scholars and practitioners (Absolon, 2011; Kovach, 2005, 2009; Iwama et al., 2009; Smith, 1999; Wilson, 2008). Rather, this book offers a conversation about how ongoing structures of colonialization negatively impact the well-being of Indigenous peoples and communities across Canada that has resulted in persistent health inequalities. This book is a unique scholarly contribution that yields valuable insights into addressing health inequalities and intends to bring the concept of decolonizing research methods and Indigenous peoples into mainstream sociology in a way that has until now been neglected. For me, the decolonization of research within social sciences is about relational allyship, partnership, honouring Indigenous ethical protocols, holding space for resurgence, and challenging power structures. In decolonizing my own research praxis, I have reflected about the power structures that define and uphold my thoughts and practices. I explain how research design practices need to be culturally responsive, which means that researchers need to work in partnership with Indigenous peoples, communities, and/or organizations in such a way as to avoid misinterpretations and misrepresentations in the knowledge inquiry process. These are partnerships that will facilitate meaningful dialogue because Indigenous peoples, communities, and organizations can re-story the historical trauma on a number of levels to recreate new ways of understanding and contesting the deeply ingrained structures of inequality.

**How the Book Is Organized**

This book is organized into six chapters. Chapter one is the introduction and situates the book’s topic within a broader range of contemporary concerns over the relation among settler relations in Canada, ongoing colonial practices, and Indigenous health and wellness in Canada. I argue that critical reflection on research methodologies has something important to add to these issues and I offer solutions that centre Indigenous knowledge systems to address health inequalities.
Chapter two provides a critical review of the impacts of colonization on Indigenous peoples in Canada. The discussion focuses on government assimilation policy, the reserve system, and residential schools and outlines the effects of colonization in the context of health and well-being. The chapter discusses the 2015 Truth and Reconciliation Commission and the ninety-four Calls to Action and how they are related to health and well-being but that little has been accomplished since 2015. A central theme of this chapter is the ongoing processes of colonialism through the legacies of the residential school system, Indian Act, Department of Indian Affairs, and ongoing state-centric colonial practices, which all have negative impacts on different states of Indigenous well-being. Chapter three explores health and wellness and struggles for self-determination coupled with a holistic understanding of health and wellness that relies on the First Nations Perspective on Health and Wellness (FNPOW) and the interrelationship and balance between physical, mental, emotional, and spiritual aspects of the Traditional Medicine Wheel (FNHA, 2013a). This provides a contextual understanding of how Indigenous peoples’ relationship to colonialism has impacted overall states of health and wellness. Given that little substantive research has examined the complexities of urban Indigenous health and wellness using participatory action research that incorporates a mixed-methods approach, this chapter makes an important contribution to the urban Indigenous health literature by examining the role that FNPOW plays in shaping holistic health.

The concept of social capital first articulated by Pierre Bourdieu provided an initial theoretical framework, which has been further developed by studies of well-being. Social capital has been well identified in the literature as an important resource for community capacity building and for fostering the good life in an urban context (Gray et al., 2008; Hill & Cooke, 2014; Newhouse & Fitzmaurice, 2012; Simpson, 2011). Chapter four on social capital and strategies for building community capacity reviews the conceptual frameworks and measurement tools that have been developed since the 1970s by various countries, organizations, and groups as composite measures of well-being. The link between social capital analysis and Indigenous well-being is important when we examine the state-centric approaches through frameworks and indicators that have been developed to measure Indigenous wellness and its associated attributes in Canada. Empirical research into the association between social capital and health has provided strong support for considering social capital as a health determinant, with testable hypotheses and interpretive results (Robson & Sanders, 2009). This chapter considers the relationships that occur across individual and
community levels of well-being that emerge in the urban landscape and how social capital can be applied to health and wellness within urban Indigenous communities.

Chapter five on two-eyed seeing and decolonizing research methods will show that participatory action research differs from most other approaches to Indigenous health and wellness research. The conversation will describe how participatory action research, using mixed methods, creates openings for reflection, knowledge co-creation, and action that aim to improve health and reduce health inequities through involving the people who, in turn, take actions to improve their own health (Castellano, 2004; Smith, 1999). In this chapter I explain how to create a study that demonstrates the extent to which both Indigenous and western knowledge can be reconciled while at the same time maintaining academic rigour and supporting a two-eyed way of seeing health and wellness.

Chapter six, the concluding chapter, will bring together the themes discussed in the previous chapters and will discuss the importance of honouring Indigenous ethical protocols, the limitations of the two-eyed seeing approach, and allyship through responsive research. In doing so, the chapter will bring together many concepts, such as self-determination, decolonization, and research methods and situate the conversation in the context of social capital analysis in relation to Indigenous health and well-being as we go forward. The discussion will also show how these concepts relate to a critical engagement of social research methods with the introduction of an innovative and integrative methodology of participatory action research, which we refer to as responsive research and the Translocal relationships, Responsibility to partners, Accountability mechanisms, Community timeframes (TRAC) method. I co-designed the TRAC method with Indigenous scholar Jeff Kanohali-doh Corntassel while we were working in partnership with a non-profit organization on a gender-based violence project across Nunangat. The TRAC method of responsive research braids Indigenous and western social scientific epistemologies at various stages of the research process and has been successfully applied in community-based research. We are further developing TRAC as a research approach to offer to scholars, practitioners, activists, and students in their future work.
The recovery of the 215 children at the Kamloops Indian Residential School in BC was publicly announced at the end of May 2021. Since then, many more children have been recovered. Indigenous communities across Canada have been experiencing tremendous grief and pain as they continue to process this horrific information. I acknowledge the ongoing impacts of residential schools and the testimonies of survivors. My thoughts and heart are with Indigenous children of the residential schools across Canada who are now making their way back home.

There are many people who have helped me intellectually, emotionally, and professionally to open my heart and mind to develop the relationships that are interconnected to the ideas written in this book. I am thankful to the First Nations Health Authority Staff in helping to arrange the interviews, and thankful to the key knowledge holders and Elders who shared knowledge that shaped the research and guided my use of the First Nations Perspective on Health and Wellness.

I am grateful to many sociologists who have worked with me, especially Bill Caroll who has greatly influenced my scholarship. I am also grateful to James Frideres for his ongoing academic support and to Doug Baer for sharing his statistical guidance. I also appreciate the suggestions on the manuscript from the Indigenous scholars invited for review, who provided engaging and thoughtful recommendations to strengthen this work. Thanks to everyone at the University for Toronto Press for their technical support: Anne Brackenbury, Susan Bindernagel, Stephanie Mazza, Robin Studniiberg, and Siusan Moffat and especially Jodi Lewchuk for her tireless efforts and dedication. I am grateful for the beautiful artwork that was provided by Christi Belcourt. The work is called “The Wisdom of the Universe” and this Indigenous artwork, wrapped around the cover, reflects the main ideas.
presented in the book and some of the Indigenous world views also described in the book.

I am forever grateful to my family. My grandparents, parents, and children who stood by my side and offered love and encouragement. Most of all, I must thank Jeff Kanohalidoh Corntassel for holding creative space for me to dream and challenge colonial structures uninhibitedly. The Cherokee teachings of the *Sacred Fire* and *How Medicine Came to the People* and Jeff’s ceremonies, songs, dances, and his notions of *Everyday Acts of Resurgence* have provided powerful ways of being in the world. Through this Cherokee knowledge sharing combined with Jeff’s academic knowledge, I was able to ground my thinking and finish this work – wado and gv ge yu.