4.6: Recommendations for Working with Indigenous Communities

Ethics and Research Guidelines

Indigenous communities and people have a history of being over-studied and “tokenized” when non-Indigenous people engage and elicit their help (Campbell, 2014; First Nations Centre, 2007). This has led research organizations such as the Canadian Institutes of Health Research (CIHR) (2007), Social Sciences and Humanities Research Council (2015), and the First Nations Centre (2007) to develop guidelines for anyone researching Indigenous people. The first set of principles developed by CIHR (2007) provide a collective set of guidelines to “assist researchers and institutions in carrying out ethical and culturally competent research involving Aboriginal people” (p. 259). According to Ramsden et al. (2017), the guidelines state:

engaging with FN communities is in Chapter 9 of the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* . . . where research projects involving First Nations, Inuit, and Metis peoples and their communities are to have a role in shaping and co-creating all research that affects them. (p. 2)

This certainly respects the autonomy of Indigenous clients, their families, and communities who participate in research opportunities (Campbell, 2014).

The First Nations Centre (2007) developed a set of principles referred to as OCAP (Ownership, Control, Access, and Possession). Ownership challenges the academic notion of intellectual property and describes the community ownership of data. The concept of control challenges the academic notion of control of the research process. The principles that guide community access and possession require that the community has full access to and possession of the research information. In leadership positions, it is important to understand how to apply these principles to work and initiatives.
involving Indigenous people.

**Essential Learning Activity 3.5.1**

Read the [CIHR Guidelines for Health Research Involving Aboriginal People (2007–2010)](https://med.libretexts.org/Bookshelves/Nursing/Book%3A_Leadership_and_Influencing_Change_in_Nursing_(Wagner)/04%3A_Leadership_and_Influencing_Change_in_Nursing_(Wagner)/4.5.1), then answer the following questions:

1. Why was it important for CIHR to develop these guidelines?
2. What is participatory research and why is it important?
3. What does “collaboration” mean to you?

In addition to the guidelines described above, researchers have identified the importance of issues that are raised while working with other cultures (Clandinin & Connelly, 2000; Ermine, 2007). Ermine (2007) discusses the importance of creating a respectful research relationship and asks researchers to consider the **ethical space of engagement**:

> The “ethical space” is formed when two societies, with disparate worldviews, are poised to engage each other. It is the thought about diverse societies and the space in between them that contributes to the development of a framework for dialogue between human communities. The ethical space of engagement proposes a framework as a way of examining the diversity and positioning of Indigenous peoples and Western society in the pursuit of a relevant discussion on Indigenous legal issues and particularly to the fragile intersection of Indigenous law and Canadian legal systems. (p. 193)

He argues that researchers must examine the influence of Western perspectives on their understanding of the world and recognize that their perspectives often provide only one viewpoint. A broader examination of cultural, social, and political factors is important when working with and caring for Indigenous persons. It is essential for researchers to recognize and critique the historical relationships between Indigenous worldviews and Western thought (Barlow, 2009; Ermine, 2007; Patterson, Jackson, & Edwards, 2006).

**Research Note**


**Purpose**

The purpose of this article is to begin the discussion on “authentic engagement” in developing manuscripts and presentations that evolve from research that has engaged particularly Indigenous patients, individuals, or communities.

**Discussion**

In Canada, it is outlined in the *Tri-Council Policy Statement* that First Nations, Inuit, and Métis peoples have a role in shaping and co-creating the research that affects them.
Application to practice

As nurse leaders we need to take heed of research frameworks such as those mentioned above (CIHR, OCAP) and ensure that these principles are adhered to so as to maintain the ethical and meaningful involvement of Indigenous people in Canada in both research and practice.

Truth and Reconciliation Commission of Canada

It is well documented that Indigenous culture and identity has been lost as a direct result of residential schools and institutionalization (Adelson, 2000; Barlow, 2009; Comack, 2008; King, Smith, & Gracey, 2009; Laliberte et al., 2000; Truth and Reconciliation Commission of Canada, 2015). Adelson (2000) argues that if colonialism and neocolonialism created disenfranchisement and attempts to eradicate cultural history, then “reconstitution and reaffirmation of identity” (p. 30) may be what is needed to counteract those acts. The Truth and Reconciliation Commission of Canada (2015) offers a detailed document that provides not only a history of the effects of colonialism in Canada, but also a call for action to address the assimilation attempts on Canadian Indigenous people by churches and governments. The document provides “calls to action” to “redress the legacy of residential schools.”

Research Note


Purpose

The purpose of this article is to describe the theoretical development of the Indigenous Cultural Responsiveness Theory (ICRT) to improve Indigenous health and well-being.

Discussion

The article draws upon the document entitled Cultural Responsiveness Framework developed by the Federation of Sovereign Indigenous Nations (FSIN) and draws upon the knowledge of Indigenous leaders, knowledge keepers, scholars, and health care practitioners to look at a model that discusses and reinforces the importance of having Indigenous communities, scholars, and individuals involved when addressing any work done with Indigenous people. As a nurse leader it is important to be aware and understand your own perspectives and biases and compare it to those you are engaged with.

Application to practice

The Truth and Reconciliation Commission of Canada calls upon those who can effect change within Canadian systems to recognize the value of Indigenous healing practice and to collaborate with Indigenous healers, Elders, and knowledge keepers where requested by Indigenous Peoples. . . . Decolonizing practices include privileging and engaging in Indigenous philosophies, beliefs, practices, and values that counter colonialism and restore well-being. The ICRT supports the development of collaborative relationships between Indigenous Peoples and non-Indigenous allies who
seek to improve the status of First Nations health and wellness. (Sasakamoose et al., 2017)