Webinar - What does meaningful engagement mean: "Drinking tea" with practitioners of Indigenous-led community-based participatory research (ILCBPR)

Description

Despite several approaches to Indigenous participation and engagement proposed by the federal government, Indigenous communities are demanding that the development of distinctions-based and culturally relevant Indigenous specific HIA require a stand-alone Indigenous specific HIA process informed by guidance, expectations, and standards established by Indigenous communities themselves. In this webinar, Drs Diana Lewis and Heather Castleden will share their experiences of working in collaborative and meaningful relationships with Indigenous communities across Canada. At the core of a community-based participatory research (CBPR) approach is the equitable and meaningful involvement of community partners in all phases of the research process, from the focus of study to knowledge mobilization (Castleden et al., 2012; Lewis et al., 2025). This webinar provides transferable insights for "how to" do meaningful engagement in research to health impact assessment.

Bios

Dr. Diana Lewis

Dr. Diana Lewis is a member of Sipekne'katik First Nation and Associate Professor/ Canada Research Chair (Tier II) in Indigenous Environmental Health Governance in the Department of Geography, Environment & Geomatics, University of Guelph. She is also Director of the IndigenERA Lab and a Member of the Royal Society of Canada (2025). Her research focuses on promoting understanding of Indigenous worldviews in environmental decision-making and advocating for Indigenous-led approaches to give communities baseline health data and sovereignty over the data in environmental decision-making. She is currently working with Indigenous communities across Canada to develop an Indigenous-led environmental health risk assessment approach.

Dr. Heather Castleden

Dr. Heather Castleden (she/her) identifies as a white settler scholar, with British ancestry. She is a planetary health geographer and does community-based participatory research (CBPR) in solidarity with Indigenous Peoples in their communities and with their organizations and Nations. Together, they identify priority research issues that engage with the nexus of culture, place, power, resistance, resurgence, and relational accountability to the land and each other. She has held a CIHR New Investigator Salary Award, a Canada Research Chair, and she is now a Full Professor and the President's Impact Chair in Transformative Governance for Planetary Health at the University of Victoria. She is the Scientific Director of the HEC Lab, Co-Director of the Archipelagos of Indigenous-led Resurgence for Planetary Health project and podcast. Dr Castleden is an elected member of the Royal Society of Canada's College of New Scholars, Artists, and Scientists.

Transcript

Denica Bleau: Good morning, everyone. Welcome to the webinar, *What does meaningful engagement mean: "Drinking tea" with practitioners of Indigenous-led community-based participatory research.* My name's Denica Bleau, and I'll be moderating today's webinar. We'd like to acknowledge and thank Health Canada and the Public Health Agency of Canada for their financial contributions to this report and to this webinar.

Before we start, I'll traditionally introduce myself. So, tânisi, nitisiyihkâson denica, Treaty 4, oskana ka-asastēki ochi niya, Secwepemc, Puyallup mihkwâkamîw-sîpiy. So, hello, my name's Denica Bleau. I currently reside in Secwépemc Territories and spend half my time across the Medicine Line in Puyallup Territories. I'm grateful for the land and the people where I get to be a guest in, and live and learn and visit on these lands. I'm originally from Treaty 4. I'm Métis, and my maternal family is registered with MNS (Métis Nation Saskatchewan), and I'm a PhD candidate at the University of British Columbia, where my research focuses on land-based healing. I'm very excited to have, Dr. Diana Lewis here again and also Dr. Heather Castleden.

The NCCIH is located at the University of Northern British Columbia, Prince George Campus and is situated on the unceded traditional territory of the Lheidli T'enneh First Nation, part of the Dakelh (Carrier) peoples' territory.

For those of you not familiar with the NCCIH, we are one of six national Collaborating Centres for Public Health that was established in 2005, with funding from the Public Health Agency of Canada.

Our sister NCCs are focused on specific topic areas including infectious disease, environmental health, public health policy, determinants of health, and methods and tools for knowledge translation. The NCCIH is unique in that it is the only NCC focused on the health of a population. Our Centre supports health equity for First Nations, Inuit, and Métis peoples by promoting the use of Indigenous-informed evidence to transform practice, policy, and program decision-making across all sectors of public health.

So, here are a few webinar housekeeping notes: all questions for panelists, as well as technical questions, can be submitted in the Q&A window, which is at the bottom of your screen. The Raise Hand feature will not function, and all attendees will be muted throughout the presentation. Links to resources mentioned by speakers will be posted in the chat window, and you can find this webinar after post-production on the NCCIH website, in the publication section under Webinars menu item. Just to note, there may be brief pauses as we switch between presenters, so thank you for your patience on this.

In this webinar, Dr. Diana Lewis and Dr. Heather Castleden will share their experiences of working in collaboration and meaningful relationships with Indigenous communities across Canada. At the core of community-based participatory research (CBPR), the approach is the equitable and meaningful involvement of community partners in all phases of research processes, from the focus of study to knowledge mobilization. This webinar provides transferable insights for how to do meaningful engagement in research to health impact assessments.

Here are today's presenters. Dr. Diana Lewis is a member of Sipekne'katik First Nation and Associate Professor/Canada Research Chair in Indigenous Environmental Health Governance in the Department of Geography, Environment, and Geomatics, University of Guelph, and she'll further present herself in a minute here.

And Dr. Heather Castleden identifies as a white settler scholar with British ancestry. She's a planetary health geographer and does community-based participatory research in solidarity with Indigenous people in their communities and with their organizations and Nations.

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And I'd just like to thank everyone for joining us today, and there will be a brief pause as we switch to today's presenters.

[brief pause]

Dr. Diana Lewis: Perfect. Thank you very much, Denica. We have launched a webinar series about Indigenous leadership in, and experiences of, health impact assessment in Canada, for which there are currently no guidelines. The first webinar explored what an Indigenous-specific, distinction-based, health impact assessment process would look like if we were to have guidelines. This second seminar explores what it means to meaningfully engage with Indigenous communities more broadly.

[brief pause]

Dr. Diana Lewis: Give us a sec. Kwe, n'in teluisi Dr. Diana Lewis, tleyawi Sipekne'katik, aq Mi'kma'ki. Wela'lioq, tan teli pejitayoq. My name is Dr. Diana Lewis. Most people refer to me as Dee. I'm from Sipekne'katik First Nation in Mi'kma'ki, what you know as the Atlantic Provinces. Thank you for coming. I'm Associate Professor and Canada Research Chair of Indigenous Environmental Health Governance, and Director of the IndigenERA Lab. We'll drop a website link in the chat for you. Heather?

Dr. Heather Castleden: Yeah, I'm Heather Castleden. As Denica introduced, I'm a white settler researcher. My ancestors are English and Scottish. I was born in the territory of the Yellowknives Dene, but I was raised in Treaty One. I now live in Lək̓ʷəŋən and W̱SÁNEĆ Territories on southern Vancouver Island. I'm a full professor and former Canada Research Chair. I now hold the Impact Chair in Transformative Governance for Planetary Health at the University of Victoria. I'm the Director of the HEC Lab for Healthy Environments and Healthy Communities, and I am a co-host of a podcast called Indigenous Planetary Health that I hope you'll all check out. It's a pleasure to be here with you all today, and I hope you have your cup of tea as we get into this webinar today.

If we could go to the next slide, Dee: we want to get a sense of who's in the room. And we have three questions. There is some sort of magical survey that's going to show up in just a second. But our first question is just to get a sense of, are you here from a student perspective, a researcher perspective? Are you here from an Indigenous Nation or organization, for government, that kind of thing. We'd like to get a sense of whether or not you work for or with an Indigenous community or if you have in the past. And then how familiar you are with some of the abbreviations that we're going to be using. So, one is about a process, so community-based participatory research, sometimes called action research or participatory research. The other is OCAP® [ownership, control, access, and possession], and the third is the Tri-Council Policy Statement. So, if you could just say, on a scale of one to five, how familiar you are with those.

I believe Sarah, who's doing tech support here, will be able to post this survey somehow, and we'll get people to respond to that. We're expecting about 350 responses, so go for it, folks, when it's posted. And you answer all three questions all at once. I'll just give you a minute to do that.

[brief pause]

Dr. Heather Castleden: And I'm guessing most people are probably done by now, and we'll have some generated responses in just a sec that we'll go over to see who's in the Zoom room with us. Alright, Sarah, if you're able to show us our results, that would be great.

Alright, so who's in the Zoom room? We have a lot of folks from government, about 40% of participants. We have 10% from Indigenous organizations or nations. We've got lots of students and researchers, and lots of folks from community and non-profit. Wonderful. So exciting to have you all here.

And then the question that we also asked was: do you work with community? And we have a strong showing of at least 80% have either currently working or have worked in the past with Indigenous communities, and 20% have not.

And then finally, with respect to how familiar you are with some of these concepts about community-based participatory research, First Nations ownership, control, access, and possession, and Canada's Tri-Council Policy Statement (TCPS) on the Ethical Conduct of Research involving human participants. So, it sounds like this is a fairly new area for a lot of folks in the Zoom room, in which case, we've got our work cut out for us, Dee, on what we're going to be covering today, which is great.

Thanks, everybody, for going through that little process with us. Normally, if we were really drinking tea, we'd be going around the Zoom room and doing introductions with everybody, but with 300 and some participants, I just don't think that's realistic. And we won't have time to do some of our story sharing.

If we can go to the next slide, Dee, we'll just let folks know what to expect over the next hour and a bit. We want to first just go over what was covered very briefly at the last webinar, where Dr. Lewis and Dr. Elana Nightingale covered some health impact assessment basics and best practices. So, Dee is going to cover that, but then the most of our focus today is just around, sort of, the theoretical framing of what is community-based participatory research, and what it means to drink tea, and what it means to drink more than just one cup of tea, if you will.

So, we're going to focus a lot on this shift from researcher, or investigator-driven research, to community-based research, to Indigenous-led community-based participatory research (ILCBPR),

because there's a lot of overlap in what we say about Indigenous-led CBPR and that of Indigenous-led health impact assessments. So, we see a lot of crossover there.

We're going to do a bit of storytelling and share some of our own personal experiences in this space, and we'll wrap up with some concluding remarks that are actually really focused towards those in the Zoom room who are from Indigenous communities or from Indigenous organizations, like some ideas about what to watch out for and how to get the best collaborators you can for your own health impact assessment work. And then we'll have some time for questions, if folks have any.

Okay, over to you, Dee, for the next slide.

Dr. Diana Lewis: Thank you, Heather. The Impact Assessment Act of 2019 defines adverse change to the health, social, or economic conditions of Indigenous peoples of Canada, and the positive and negative consequences of those changes, as within federal jurisdiction. Although the Impact Assessment Act mandates the consideration of potential impacts to health, in this country health impact assessments continue to be voluntary. The International Association for Impact Assessment [IAIA], widely accepted as putting forth informed guidance for practitioners, recommends that impact assessments take a comprehensive and equitable approach to health that engages all potentially impacted groups.

A recent review by McDermott and colleagues of health impact assessment frameworks, however, found that none of these provided adequate guidance to reflect the five key principles to guide the development of health impact assessments, as put forth by the International Association. The citation will be shared in the chat. These IAIA five Key Principles include: taking a comprehensive approach to health, engaging all potentially impacted groups, considering equity and equality in the distribution of health effects, committing to the ethical and impartial use of evidence, and highlighting sustainability in the assessment of short- and long-term future impacts. As health impact assessments are becoming increasingly recommended in impact assessment processes, there is a need to develop this guidance. For Indigenous peoples, this is an urgent concern that requires a stand-alone and Indigenous-led process established by the Indigenous peoples themselves. Next slide.

So, what does that look like? Based on our literature review, we suggest that in order for health impact assessment processes to be meaningful for Indigenous peoples and to be reflective of their knowledges and values, Indigenous-specific health impact assessments should follow eight best practices: be Indigenous-led; determine potential impacts based on community-specific models of health and well-being; assess impacts relative to community-specific baseline health data; draw on Indigenous value-based methodologies; prioritize cumulative effects; respect Indigenous jurisdiction over Indigenous knowledge systems; enhance relationships and communication between Indigenous peoples,

government, and industry; and integrate culturally relevant gender-based analysis and equity considerations. Next slide.

Dr. Heather Castleden: Yeah, thanks Dee. So, we're going to move into the community-based participatory research space, and we're going to riff off of this idea of "drinking tea" a fair bit throughout our presentation.

So back in 2012, I worked with two of my former students on a research project that explored how do Canadian university researchers embody and understand, what does it mean to do community-based participatory research involving Indigenous peoples? And it was because I had gone from doing investigator-driven research and had moved into doing CBPR that was collaborative and co-created with Indigenous partners. But the more I was presenting about it, I was starting to hear more and more people talk about doing CBPR as well, and so I really wanted to get a sense of like, are people doing what you would expect to see based on how the literature describes CBPR? So, I'm going to get into that a little bit, but first, if we could go to the next slide.

I'll just distinguish what do I mean by investigator-driven research. And so, in this kind of research, the scientist is considered, or the research is considered, the expert, neutral observer of natural or experimental phenomenon, and the knower of truths. That kind of mentality has held sway in university environments for decades. It was considered the gold standard in research because of its clean lines, its linearity, it's step-by-step "this is the way you do it," and also the ivory tower goal of generalizability to wider populations. The way I see it is it's like a one-size-fits-all approach where if it works here, it's going to work there, and hopefully a key message that you pick up from our conversation today is that it's not a one-size-fits-all approach.

So, in investigator-driven research, the investigator chooses the question, collects the data, analyzes the data, and publishes the findings in peer-reviewed journals. And for a bit of a tongue-in-cheek example, let's just say I'm an epidemiologist and I want to know, does comedy kill? And so, for example, I might do a retrospective, longitudinal cohort study about people who have died from heart attacks, and cross-reference that with coroner data about the location of the death. That is, did they die in a comedy club? And that's the investigator deciding, "This is an important research question to me." But is it useful? And I suppose for the researcher's academic career it is because they would publish something, and we count everything in academia; we count how much we publish, how many grants we have, how many students we supervise, that kind of thing. But in CBPR, the approach is totally flipped, or at least in theory, it is.

So, in CBPR, in theory, the investigator works with the community to explore and drink some tea together to figure out what questions we might ask together, and how might we use some research methods to answer those questions. And then we would look at the data together and analyze it

together, and share findings so that it's mutually beneficial, so that, yes, the academic gets the publication, which is important for their career progression, but the community gets the answers to the questions that they have.

So, what I found in my research, 15 years ago, after interviewing all of these Canadian researchers who self-identified as doing CBPR with Indigenous communities, is that most of us weren't there yet. So, a lot of what I heard was that they were still bringing their topic to a community, often as a cold call, not with pre-existing relationships built on any sort of reciprocity, or trust, or respect. And one of the key things I remember one of the participants saying to me was, when I asked the question, they said, "Well, I didn't bully my way in, but I certainly wasn't invited." And so that was a key moment of "aha" for me about what makes community-led research different than just your sort of general CBPR.

In our interviews with participants, we also heard that a lot of them were definitely engaging community in data collection; so they might be hiring community members to help with data collection and translation, but where things kind of fell down was that they were taking the data away from the community and doing the analysis, and then publishing their findings. And historically, what we are also hearing, especially from communities, is that those researchers weren't coming back to share what they had found, and nor were they acknowledging how the community was a co-creator of that work. And so there would often be a mention of acknowledgement, but not a recognition of shared knowledge creation.

And one of the things in that research, again, that really struck me was that academics don't want to give up control of how something unfolds, and so it can be very scary for a researcher who's used to being told they're the expert in something and this is the way they do things, to suddenly give up control and say, "Well, maybe the community knows best, and maybe I don't." And so, there's this lesson in humility that I also think is something that runs through the process of coming into doing CBPR in a good way.

And so, after 15 years of working together, Dee and I, we decided it was time for a new article to look at how are people now thinking about community-based research, especially because we've seen a real shift towards Indigenous-led CBPR. And so, we did another paper and this time it's more than just drinking tea. So, over to you, Dee.

Dr. Diana Lewis: Thanks, Heather. In 2023, a group of us got together to reflect on a seven-year research journey of Indigenous-led CBPR that we were starting to wrap up. We asked ourselves, "What did we have to offer from that journey that others could learn from?" What we learned was that it was more than simply drinking a cup of tea together. Shared through the eyes of the newest member of the team to Indigenous-led CBPR, she found this approach to research to be a lot of chatting, laughing, walking, eating, celebrating, remembering, and optimistic debates about what color

of grey would be considered closest to blue for a February sky on Vancouver Island. We were three days in before we put words to paper. What we had done was take the time to build the relationship – a relationship that would take us, as a team, until midsummer to submit the first draft of a manuscript to an academic journal.

So, in response to Heather's slide on CBPR, our approach to Indigenous-led CBPR is that we are grounded in and based in relational ethics and accountability. We are caring for and responsible to all of our relations. We collaborate. We collaborate on the research questions, the kind of data that is needed, how it is collected, analyzed, and shared. The Native Women's Association of Canada has developed culturally relevant gender-based analysis that recognizes that sex and gender intersect not only with identity factors, but intersect with historical, cultural, racialized, and political factors that shape Indigenous experiences. Understanding place and timing, for example: do you know who are the original inhabitants of this land? Do you know what their responsibilities and relationships to the land are? How were they dispossessed of their lands? I would stress, you need to know this. Do not burden the community by coming in and not having done your homework or asking them to bring you up to speed.

Acts of refusal, for example: in the *It's more than drinking tea* article, we write about a community not wanting their data to be shared with the larger project team, and we worked through that to respect the autonomy of the community to make that decision and to respect their sovereignty over their data. As mentioned already, respect that the community owns their data and will decide when and who and where that data will be shared, and they are co-authors on and decide what will be published. And finally, we remind you that you have responsibilities to understand how Indigenous-led research will proceed. Heather?

Dr. Heather Castleden: Thanks, Dee. Yeah, Indigenous-led CBPR is, in many ways, the same as what I had described about how CBPR is intended to be, in theory, but it actually goes one step further to seeing Indigenous leadership in all aspects of a project's decision-making. This ensures relevance to the community, respect for their priorities. It creates space for relationality. It ensures people understand what their responsibilities are and how the researcher or the consultant is accountable to the community or nation. This means the community decides what research questions to pursue, as depicted in Figure A here, where Dee and I were invited to meet with the community leader to hear about their community's priorities for research. In Figure B, this means the community decides how to do research and what methods to use.

And so, we all come together, and in this case, it was together in ceremony and in relationality, for deep discussion over several days. It's not over email, it's not over Teams or Zoom. It's in person, in relationship, on the land. It means that the community decides how to make sense of the data and how to use the data, as depicted in Figures C and D, where we were engaging in collaborative analysis.

And it also means that the community gets the findings first, not as an afterthought. It's depicted in Figure E, where things are also discussed internally before deciding if or when to share this new knowledge beyond the community. Next slide, Dee.

Dr. Diana Lewis: There are many examples to ensure that we are respecting data governance and data sovereignty. Here is the list of some of the principles, best practices, and guidance documents that have been developed by Indigenous people that you can refer to. Links will be shared in the chat.

Do you know what OCAP® and OCAS stand for? – Ownership, Control, Access, Possession, or Stewardship. The Tri-Council Policy Statement for the Ethical Conduct of Research Involving Humans has a chapter, *Chapter 9: Research Involving First Nations, Inuit, and Métis Peoples of Canada, a*nd the First Nations Information Governance Centre has developed a First Nations Data Governance Strategy. Next slide. Over to you, Heather.

Dr. Heather Castleden: Thanks, Dee. All right, just a reminder that now's the time to grab your cup of tea because we're going to get into some storytelling here and shift gears a bit. And I'm going to start with one about how I made the transition from doing investigator-driven research to CBPR.

And I want to gratefully acknowledge Łutsël K'é Dene First Nation, a Dene community in the Northwest Territories, for teaching me indirectly about how to drink tea. And so it kind of began like this: in the early 2000s, I was just starting my graduate studies, and I had been trained in the Western tradition of how to do research, and that is, you look at the literature, you find a gap in the literature, and then you fill it with a project of your own design.

So, for me, I had – I mentioned earlier that I was born in the territory of the Yellowknives Dene, so up in the Northwest Territories, but I wasn't raised there. My first career was as an American Sign Language interpreter, so I'd worked a lot with the deaf communities of Winnipeg and Vancouver, and I had been studying Indigenous health at university. And so, I brought those threads together and wove a research question out of that, and that was: what is the experiences of families raising deaf children in the North and how can they be supported with access to sign language and deaf culture? And so, I had heard that, through sort of networking, that Łutsël K'é, which is a fly-in community of about 300 people, had a family with a deaf child. And so, I thought, "Well, this is great. This fits what I need to do." And so, I called up and said, "Could I come to the community?" And the answer was yes, but I didn't really get into what was I going to be doing and that kind of thing.

When I got there, I discovered that my research question was not the community's priority. The family that had a deaf child no longer lived in the community, and I was sort of stuck of like, "What am I going to do?" And so, do I continue on in my research trajectory, because that's what I've been trained to do, or do I do something else? And ultimately, I think I was too afraid to break free of what it was

that I thought I was there to do, so I carried on with my project and spoke with people who were related to the family or were in positions of health and social and political leadership, but I also spent a lot of time going to community events, and hanging out at the band office, and going to the community hall, and speaking with people outside, and going hunting, and just trying to learn more about the community while I was there.

And the more I listened and drank tea with people, the more I heard about this really pressing issue in the community, and it was about human-induced changes to caribou migration patterns due to a new open-pit diamond mine. And I thought, "My goodness, if I had just asked permission to come and just spent that whole month, that first month, just listening, I might have been able to come up with a research project that would have been useful at that time to the community." And so, while I completed my study on deafness, I really felt uncomfortable about what I was doing there, taking up space, that was not meaningful or useful to the community at that time. And it was at that point that I said never again, and I embraced the idea of doing community-led participatory research.

So, my next study, when I finished - that was my Master's degree – when I wanted to do my PhD, I thought, "Well, I'd really like to go back to Łutsël K'é and explore, maybe this is the time, maybe the time now is right to do this caribou migration study." And so, I thought, well – and from a relationality perspective, a lot of things had changed in my life. I now had a new baby, my first baby, and I thought, "Well, I'm going to bring my baby with me," and so then I'm like, "Well, I'm going to bring my parents with me, too."

And so I went to the community and I stayed for a month, because I thought a month is a really a decent amount of time for me to start to get a sense of what are the priorities in the community, to meet the people that had supported me my last visit and my last research project, and to determine whether or not now was the time to do a project, if it was useful to them. But I learned, once I got there and made those connections, that they already had researchers in the community that were doing that work and they didn't need me. And so, it became just a really wonderful visit. And so, if we can go to the next slide, I'll just carry on with my story, Dee.

So, then I had to determine, as a PhD student who wants to do community-led research, how is that going to unfold? What relationships do I have? I knew that Łutsël K'é didn't need me, and so is there another place that I could be of service in research? And so, I wanted to draw on what I was learning as a university student about geographical theories of culture and place and health, and I wanted it to be useful with whoever I collaborated with. And so, I started to explore other options, and I started drinking tea in other spaces. For example, I was then living on Vancouver Island and I learned about a weekend conference that a nation, Nuu-chah-nulth Nation was hosting about cedar. And I reached out to see if I could attend, after explaining a little bit about who I was as a student, and they said yes. And then I asked, "Is there anything I can do to be of use at this conference? I don't want to just go

and consume and take things away. What could I give?" And they asked if I had a good quality camera, and I said, "As a matter of fact, I do." And they said, "Could you be our conference photographer?" And I said, "Sure." And it was just such a wonderful way to meet community leaders, and Elders, and carvers, weavers and foresters. And by the end of it, the Chief Councillor invited me to visit the community, meet the Council, and talk about what research we might possibly do together.

So, at that meeting, we talked about the Cedar Symposium, how we could turn it into a research project, and we talked about what kinds of methods we might use to explore Huu-ay-aht relationships to Cedar. And what I heard loud and clear was, "Not another interview, not another survey. We are inundated with those kinds of things." And it turned out, I had just been exposed to a new method called photovoice, and so we thought, "Let's use photography and storytelling to do this project." And the Council immediately struck an Advisory Committee to help guide me as an outsider in the community, and that Advisory Committee was a group of three: a community archivist, an elected Counselor, and a Hereditary Chief. And I was also able to hire a couple of community members to help collect data and analyze it with me.

We agreed at the outset about how we would acknowledge the Nation's contributions, and so you can see on the slide here that, Huu-ay-aht First Nation is an author on the work, that the findings were also not just for me. This was a project that was intended to have more than academic impact; it was about developing research capacity in the community, technical capacity around doing a particular method. The findings contributed to land use and community planning. It helped identify health priorities. Findings were used in their legal proceedings, their treaty negotiations, in a film festival, and a general sense of this is the community's project.

So that's essentially how I do my research now, but more often than not, Dee and I are – while we're getting invited to drink tea with communities, Indigenous communities are definitely leading now. It's no longer only researchers reaching out. But it's the way in which we academics, consultants, governments are interacting with Indigenous peoples. Word gets out, and so people have reputations about how they engage in these spaces, but even when communities reach out, like a group of women from Pictou Landing did with Dee, she still had to drink tea. So, I'm going to turn it over to you, Dee.

Dr. Diana Lewis: Thanks, Heather. The Pictou Landing First Nation women invited me into their community. I am Mi'kmaw from a nearby reserve. They had heard that I had just finished a Master's degree in resource and environmental management. Some of the women knew my family, my parents, grandparents, but I still had to drink tea with the women. They told me their story of being impacted by a nearby pulp and paper mill, and that no one was listening to their concerns about the potential health impacts on their community members. They asked if I could help.

Feeling a little overwhelmed by what they were asking, I then asked if I could introduce them to researchers at Dal [Dalhousie University], where I had just graduated. I had learned about Heather, who had recently started working at Dal. I sussed her out before having her join me to meet the women at a Pictou Landing First Nation Native Women's Group meeting. Heather?

Dr. Heather Castleden: Yeah, I remember when you walked into my office and we kind of clicked, and then you started to tell me about the project. And I was immediately honoured but also feeling really nervous about doing this kind of project because I didn't have epidemiological skills, I didn't have environmental engineering skills or ecotoxicology skills, but I really valued community-led research. So, working with a group of women who wanted to lead this research project was really inspiring and hopeful. And I thought that one of the things that I could do is be a bit of a bridge between connecting them with other potential experts that could fill certain gaps in the Western part of the science that we were doing. And this project that we ended up doing with the Native Women's Group brought in both Indigenous and Western science methods to our work.

And Dee and I suggested that we hold a panel of prospects for the project. So, inviting different experts from different universities so that the women could be kind of like - I can't remember all the names of those competitions where there's a panel of judges, and then they're like, "Who do we want to invite to the next round?" And so that's how the women chose who would be involved, who would be a good fit, who was willing to drink tea with them and take their leadership and direction. We drank a lot of tea over those five years, didn't we?

Dr. Diana Lewis: Yeah. So, I've taken what I've learned by working with the Pictou Landing Native Women's Group, and now I work with the Yukwanulha Yukwanikuhliyo, the Women of Oneida Nation of the Thames, the Athabasca Chipewyan, and Dene First Nation, Fort Chipewyan Métis Nation, and Mikisew Cree First Nation. I have recently started working with my own community of Sipekne'katik First Nation, and no one process is the same as the other. Next slide. Heather?

Dr. Heather Castleden: Absolutely. And likewise, I've also started to work with a lot of other Nations and Indigenous peoples around the world. And one of the things that I mentioned, a couple slides back around the Advisory Circle, is something that Dee and I have both embraced in our work, and we talk about it in the form of governance. And so, in terms of structuring relationships and having clear understandings about how we are going to work together, the value of an Advisory Circle from a community or communities that you're working with is invaluable. It's hard to put into words just how important it is to have that insider knowledge about what works in community. Their willingness to teach you when you make mistakes, because we all make mistakes, is just so, so critical.

And so, the governance process is just about, like, are issues of concern – how do they get decided? And who makes those decisions? And it helps ensure accountability, openness, and integrity on the

part of the researcher working in solidarity with the Nation. And so, what you see on this slide is just different types of governance structures that we've created, some large, some small. A lot of mine are growing in size and, for example, I still work with Huu-ay-aht First Nation. It's been 20 years of different research projects. My current Advisory Circle includes not just the homelands, the Treaty lands of the Nation, but also representatives from the other urban geographies where Huu-ay-aht live. It includes diversity around youth and Elders, it includes diversity around gender, and it includes diversity about which hereditary houses are represented on that Advisory Circle of eight people. So, there's a lot of intentionality around designing a governance structure to ensure a real cross-section of the community is able to direct the research.

But in other instances, we'd see governance where we work directly with the leadership, or in the case of Pictou Landing, we worked directly for the Pictou Landing Native Women's Group, and the Chief and Council were kept informed about our work, but our direct guidance was handed down to us from the Native Women's Group. So, they all look different and it's not a one-size-fits-all approach. Dee, back to you.

Dr. Diana Lewis: Thanks, Heather. As I mentioned previously, I work with the Fort Chipewyan communities. Athabasca Chipewyan, Dene First Nation, Fort Chipewyan Métis Nation, Mikisew Cree First Nation all have research agreements with their own data governance models to guide the research. The research agreements all differ from the ones with Pictou Landing First Nations Native Women's Group or the Yukwanulha Yukwanikuhliyo. They all have different surveys and priorities; they are all on different trajectories. Heather?

Dr. Heather Castleden: Yeah, so we decided to use this picture of the Boston Tea Party to show what can happen when you don't have governance sorted out at the get-go, that it can become a real brewy mess, let's put it that way.

And so, just a couple of examples on that front. So, with one Nation that I work with, they embraced the OCAP® principles, so the data is owned by the Nation, and it's stored in the Nation's archives. But we also wanted to ensure that individuals from the nation who were participating had the autonomy over their own data and whether or not they wanted to include their data in the community archive. And so, we talked about this up front with the leadership and we came up with a strategy where if an individual didn't want their data included in the community archive, they just needed to let me know, while I was doing the data collection, that this would be kept outside of the community archive, but stewarded by me for a certain length of time. So that's one example.

But another example, again, of where it could be a tea mess, is where there could be an ethics breach in research. And so how do you deal with an ethics breach? What are the consequences of that? And

if we have more time towards the end of our presentation, I can give a little bit more context to that example, but I'll maybe just leave it at that for now. And we could go to the next slide, thanks.

So, doing data collection is community-led. Doing data analysis is community-led. And in both of those, again, it's not a one-size-fits-all. So, while the Nation that I worked with previously had said, "No more interviews, no more surveys," well, 20 years later, we actually have done interviews and we have done surveys because the timing was right. But it really is context-specific, and how we collect data and how we analyze data can look very different. I could also speak to a process of data analysis with a Nation that I'm working with, where we did a series of interviews, but now the Advisory Circle is working with me and we meet monthly to go over how are people responding to the first question, the second question. There were 12 questions across this hour and a half long interview. We have lots of rich data and it's taken us a year to go through each question. And now it's taken us another six months to get to a final report that we feel comfortable presenting to the leadership and to the citizens at a People's Assembly. Dee, you probably have some examples, too.

Dr. Diana Lewis: I do. In northern Alberta, for example, we're talking about a fly-in community. I have been working with the community since 2022, but I continue to develop and nurture the relationship. Sometimes they want me to be there in person. Sometimes, it's okay to attend meetings by Zoom. We get invited to community events. The K'ai Taillé Dene Days, Treaty Days, Métis Jamboree, or maybe the Winter Carnival. We go to meet community members so they know, "Who this person is that's collecting our data?" I'm a two-hour drive from Oneida, so it's easier for me to make the drive. And we meet regularly, sometimes about once a month, depending on where we are in the research, and we show up for community events: the Fall Fair, youth camps. And sometimes, meetings get canceled on short notice due to community priorities, so you've got to be flexible and reschedule. The key message? Be prepared to accommodate what works. Next slide.

Dr. Heather Castleden: Yeah, absolutely Dee. Indigenous peoples across Canada, and certainly beyond, have been inundated with health research and health impact assessment types of work for decades. And that research is often done by non-Indigenous researchers, public servants, consultants, and it's often focused on stories of pain, disease, dysfunction. And more often than not, historically, those of us who identify as non-Indigenous are getting it wrong. We lack understanding about community values, we lack understanding about community context, and as a result, we're often misrepresenting communities. So, in short, we're often doing more harm than good.

So, we're starting to see this shift that Dee and I are talking about, about the importance of Indigenous led anything and everything. Indigenous peoples are doing their own research, they are wanting their own health impact assessments, and they're insisting that anyone who works with them are doing so from positions of support, solidarity, and humility to match where they are coming from, which is places of strength and resilience.

And so, one of the more powerful pieces of writing that I came across a decade ago was by Eve Tuck and K. Wayne Yang about refusing research. And what that means is there's some quotes that Tuck and Yang bring out in their own manuscript that you can see here, but that sometimes what happens in community stays in community around what's important for the community, but not necessarily important for publication. And that can be really hard, especially for researchers, who, part of our way of succeeding in the academy is to publish. And so, you need to be going into this relationship with your eyes wide open about what is going to be acceptable to the community, and if you can live with that, and work with that, and be flexible with that, then it's going to be a really, successful relationship. But if that is not your jam, it's not really a space for you to be in.

For Pictou Landing, with our knowledge-sharing process we came up with in our early governance structure was that everything that we do stays with the women first, and when they're comfortable, then they proceed with briefing their Chief and Council. We did community reporting, both in print, where we took our reports door-to-door to every household in the community, and we organized a community dinner to do some reporting. We had designated media spokespeople because it was a high-profile issue in Nova Scotia. And then eventually we published. But that was down the road. It wasn't something that happened right away, unlike what you can see in other types of investigator-driven research.

With Huu-ay-aht First Nation that I've been working with for a number of years, everything goes through the Research Advisory Council first, then it goes to the Executive Elected Council and the Hereditary Chiefs Council, the ḥaw̓iiḥ Council. We post something in the Huu-ay-aht newsletter. And then we eventually get to a People's Assembly and publication. So, each way of working is different, again, and I think that's one of our big emphases here. Next slide, Dee.

And so, thinking about reciprocity in research, in consulting, it's not from, in my experience at least as a non-Indigenous person, it's not meant to be transactional. It's not meant to be, "Oh, could I speak with you? Here's your honoraria for giving me your time." It's about relationality. It's about drinking tea, listening to understand what will benefit the community you're working with, how it will benefit the community, and determine how to be accountable and transparent in your collaboration. Next slide, Dee.

Dr. Diana Lewis: For those community members who are listening, here are a few modest suggestions we would like to share from our experience. Like the Pictou Landing First Nation women, interview researchers or practitioners, find the fit. Ask them to share a recent plain language publication or report. Vet them, ask for references from communities they've worked with. Ask them to come to a face-to-face visit in your community.

Dr. Heather Castleden: And ask them if they know about the United Nations Declaration on the Rights of Indigenous Peoples, and more pointedly, ask them to explain what free, prior, and informed consent means to them. Ask them if they're familiar with the principles of ownership, control, access, and possession. Ask them if they are familiar with the Tri-Council Policy Statement on Research Ethics Involving Human Participants. Ask them for copies of former terms of references, or memorandums of understanding [MOU]. Ask them to co-create them with you. Ask for what are the consequences, from their point of view, if that MOU or Terms of Reference [ToR] is breached?

And then I add, ask them the money question. And for me, that means, for researchers, we apply to the Tri-Council for grant money to do research, but that grant money doesn't go to the communities we work with. It goes to us at the university. But there are ways that we can share; we can relinquish control over grant money. And so, you can ask them, "How does that work?" Because the research funds that come to a researcher means that the researcher has control over how those funds are spent. And if there's no transparency and accountability for that, it can feel like this large grant resulted in very little impact. And I don't mean just financial benefit; I'm talking about impact in all the ways that I've articulated already. So, ask them about that, and then explore ways to make this a truly authentic Indigenous-led project, whether it's health impact assessment, or it's community-based participatory research, and to end this in a reciprocal way, I suppose, is what I wanted to say there. Next slide.

Dr. Diana Lewis: So, I would add, for those – sorry Heather

Dr. Heather Castleden: Go ahead.

Dr. Diana Lewis: So, I would add, for those who are here from government, maybe your bureaucratic processes have to change to be more relational. Listening to Heather's story, and how she spent the time in developing that relationship with Huu-ay-aht, maybe you need to think about how your policies and procedures prevent you from doing that, and from doing work in a good way. For example, this is a long weekend. I spent Sunday morning on a Zoom call with a community in northern Alberta, working on their survey. On Monday, I spent the day working with the women in Oneida Nation of the Thames. That's being flexible, so you need to look at your systems that you're working within.

Think about how long we work with community. Heather mentioned 20 years she's been working with Huu-ay-aht. We've been working 16 years with Pictou Landing First Nation. I first met Oneida in 2018. I met Mikisew Cree in 2019, and so on. These are long-term relationships that don't necessarily end.

We hope that you take what you have learned today to inform how you move ahead in your respective roles. Wela'lioq, tan teli pejitayoq. Does anyone have any questions?

Denica Bleau: Thank you, Dr. Heather and Dr. Diana. Again, if anyone has questions, please put them into the Q&A, and we have about 30 minutes to go through questions.

So, our first question – I'm just going to read it off: so, Dr. Lewis shared about understanding the place and timing of research and community as principal of ILCBPR. Why is it so important for government non-sector, i.e. consultants, to know the history of Canada, to know the history of the community, and the work within the community, and what the current issues are? So why is it important to know those things?

Dr. Diana Lewis: I'm so glad that question was asked. So, you cannot believe how over-capacity communities are. And when someone comes into the community who hasn't done their homework, who doesn't understand the history and circumstances that a colonial history produces for Indigenous communities, it does a lot of harm to our community members. There's an expectation that our community members have time to bring you up to speed on those things, and it just isn't a good use of people's time. So please, I beg you to put the time in to learn those things before you come to community. And there are lots of publicly available resources that you can refer to, and you can go to Health Canada's website. There's lots of resources developed by Health Canada, and so on. I think it's so important, I can't stress that enough. Thanks for the question.

Denica Bleau: Thank you for that, Dr. Diana. Dr. Heather, did you want to add anything before we jump into the next one?

Dr. Heather Castleden: Yeah, I would just say that I completely agree with what Dee is saying about the "Do your homework, do your learning." We hear a lot about that – ever since the TRC [The Truth and Reconciliation Commission of Canada] – about the importance of learning our history and understanding it, and doing as much as you can before you arrive in community to have done that work, but also to approach that the work you've done is baby steps. It is – you do need to approach this with humility, and recognizing that you only know so much and that there is so much more to learn.

So, I just remember my supervisors, who were from Opaskwayak Cree Nation, for my graduate work, was, "When you're there, remind people that you're there to learn, that you're a student, that you don't know everything," and so I think that was early teachings about humility. And being able to poke fun at your own stupidity, I think is a good thing too, for those of us who are non-Indigenous. And yeah, we have a lot to learn. Thanks.

Dr. Diana Lewis: And if I could just add one more thing to that, because I think it's so important. Without exception, every community we work with, when we go to meet them, we've done our homework, we are prepared to have a discussion. And the reaction that we get from community

partners is always, "Finally, somebody is hearing us. Somebody is listening to us." The goodwill that that creates for community is invaluable.

Denica Bleau: Yeah. Thank you, Dr. Diana and Dr. Heather.

This next question I relate to as a student, it's a very good one. So, how do we follow an Indigenous-led CBPR approach when we, as students, need to meet specific requirements (i.e., timelines for grant applications in academia)? How do we propose RQs [research questions] cues on papers for school, while ensuring we build in change to those RQs based on community voices?

Dr. Diana Lewis: That is another really, great question, and we've just had this experience. So, I've had four Master's students finish last term, and out of the four Master students, two of the students had to actually take longer than the prescribed time because of the time it takes to develop and nurture these relationships. One of the students actually had to shift the focus of her research, so her research question changed. Not that the community didn't support her research question; their priority at the time she needed to get out in the field just would not have allowed them the time to work with her. But they've invited her post-graduation to come back and continue that work because it's so important to the community.

So, I would suggest, if you're a student and you want to do this work, you talk to your supervisor about the expectations of doing work in a good way, and that it may not necessarily fit within the timeline. And a lot of universities now, they know this. They have experience with this. We have people working with Administration, for Administration to understand that sometimes these things can happen. Anything to add, Heather?

Dr. Heather Castleden: Yeah, I would just add that while institutions may understand that, they don't make accommodations by reducing tuition for students who are taking longer and doing community-based research. So, if there's any institutional administrators listening, that would be my message to them, is if you're doing CBPR, to consider that it does take longer, that they shouldn't be penalized, that they should be supported through funding, for the longer term.

The second thing I would say is that – one of my favorite stories about this was a dear, dear friend now, who was a student of mine, who approached me to supervise their work, and said that they were really interested in food security, or insecurity, in Northern Quebec and Nunavut. And I was like, "Yeah, that's really interesting," and he's like, "Would you supervise me?" And I was like, "no." And the reason I said no was because I first asked him, "Are you from those communities that you said are aware of food insecurity issues?" And he said "no." And I was like, "Do you know anybody from those communities?" "No." And I'm like, "well, neither do I, and you're doing a Master's project in two years, and I don't have relationships, and neither do you, and that's just not… it's not going to fly.

We don't have the time to build those relationships, to drink tea, to do that work." And so I think in the moment, there was a bit of sadness on his part, but also a realization of, "Right, that was really presumptuous of me to think I could do that." And it was just like me as a graduate student, when I was wanting to do this study on deafness, like, I really shouldn't have done it. Like ethically, I shouldn't have done it.

And I've learned that lesson, and so I now pay it forward in how I supervise students and I tell them, "If you are from that community or already have a deep relationship with that community, then let's explore it together and see if there's an interest in doing something together. What are their priorities?" And then if they don't have those relationships, that's where I'll say, "I would be willing to supervise work on one of the projects that I'm doing, but to understand as well that there is a two-step process to this." While I might say, "Yes, I would supervise you," I want them to be prepared to know that it's also the community who has to vet them, who has to decide, "Is this person of good heart and good mind, and do we want to work with them as well?"

And so, it's a two-step process. I suss it out, and then I bring them to community and the community susses them out. And so far, it's worked out really well. So that's what I would say, too. Thanks.

Denica Bleau: I love that. I love, too, when you guys were talking and Dr. Diana was like, "I had to suss Dr. Heather out." Because that's so important, relationality. So, I like that theme coming up.

So, we have Question Three: in situations where First Nations has its own established ethics review body, such as the Manitoulin Anishinaabeg Research Review Committee, how can researchers/students navigate that relationship between community-based review and university REB [Research Ethics Board] requirements?

Dr. Diana Lewis: Heather, do you want to go?

Dr. Heather Castleden: Sure, there's two papers that I want to drop in the chat. One of them is called, *Leashes and Lies*. It's a paper that I co-authored with a former postdoc of mine, and it's about the challenges of dealing with institutional ethics. So that's the first one, but it basically is – the university has procedural ethics, communities have relational ethics, and they don't look the same. And so, one of the things in the Tri-Council Policy Statement that universities have to abide by, is it says in plain language that these are guidelines and that it doesn't override community authority.

And so, a student, or a faculty member, or a researcher, independent researcher, can make reference to that in their application to the university to say, "While this is what you're expecting, I'm going with this because that's what the community's ethics say." And so, this *Leashes and Lies* paper has to do with, like, "We're on a short leash, sometimes, at the university," and so there are times where

researchers – and this was based on interviews I did with researchers – where they're like, "Well, I just did it anyway because I'm respecting Indigenous autonomy to do those things." So that's kind of my first response.

The second paper that I'd love to put in the chat is written by a former PhD student of mine, who's Kanyen'kehá:ka from Tyendinaga, and she writes this paper. The first part of the title is *Dear John*, and it's kind of like a "Dear John" letter of sort of flicking away. But basically, she's writing as a Kanyen'kehá:ka woman, doing research in her own community and having to deal with, essentially, a foreign ethics body deciding what's ethical in her space and with her Nation. And so, she writes about those tensions and as a student, she writes about how she would come to me and say, "Heather, what am I supposed to do? They want to do this in the community," and I'm like, "Then you do what they want to do in the community, and we'll deal with ethics later."

And so, this is where you're like, "I am working in solidarity with this community, and this is the flow and the pace of what things look like and how it happens." It doesn't necessarily match up with the university, but that's where you have a supervisor who's got your back, and who will support and advocate. But again, just pointing to the TCPS2 statement [Tri-Council Policy Statement, version 2] about Indigenous authority, and then you can also refer to our federal legislative act about the United Nations Declaration on the Rights of Indigenous Peoples. So, there's lots of ways you can navigate that, and I'm happy to share those papers if people want to reach out to me.

Denica Bleau: Dr. Diana, did you want to comment on that?

Dr. Diana Lewis: So, I would just add, in my community we have Mi'kmaw Ethics Watch, and so, we might be one of the older community ethics watch approaches in Canada. And when we worked with Pictou Landing Women, if Heather remembers, we asked about, "Do we go to the Mi'kmaw Ethics Watch to get permission to work in community?" And they said, "Why would you go to Mi'kmaw Ethics Watch? You have our permission to work with us." And so, it's not always so straightforward either, if the community comes to you to request that you do research with them.

Dr. Heather Castleden: Yeah, totally.

Denica Bleau: Thank goodness also for great supervisors that push those boundaries.

Okay, so Dr. Castleden: you mentioned bringing together Western and Indigenous methods and knowledge to research. How do you, or how does the concept of – I'm not going to be able to say this word – *Etuaptmumk*, or Two-Eyed seeing approach, fit within CPBR, or ILCPBR in practice? How do you approach these, bringing the Western knowledges on board as a part of research processes?

And then I think one of the other questions also mentioned there's kind of been a more recent contention of Two-Eyed seeing, so also navigating that as well. A large question.

Dr. Heather Castleden: Well, I think that's a question for both Dee and I. *Etuaptmumk* is a concept coined by Elder Albert Marshall from Eskasoni First Nation, he's a Mi'kmaw Elder. And *Etuaptmumk* has really spread throughout the country and beyond about the importance of – the way I interpret what he's said in our conversations is it's about respecting multiple epistemologies, or multiple ways of understanding and being and doing things in the world. And so, the university is very much about Western ways of doing things. It doesn't consider Global South. It doesn't consider Indigenous knowledge systems and all of their diversity, and so *Etuaptmumk* is really speaking from a place of love, and love for all of these different ways of doing things, and respecting them, and embracing them, and seeing them as equally valid in their own right, that they don't need to be validated by Western science. They have their own validation systems.

And so, I think one of the hardest things to do is to do that well, to bring Western and Indigenous sciences into conversation with each other – in parallel, braided, standalone. But I think that really it speaks to the relationality piece, and as you get to know each other and understand, like why is this so useful – and this so useful – and that they come together to create a more holistic understanding of a particular phenomenon. And I think of the Pictou Landing project, where we did bring Indigenous and Western sciences together, that if we only had one type of science, we wouldn't have had a fully comprehensive response to the question of, "Are we getting sick from the pollution from Boat Harbour?" We needed both types of science together.

So, I don't know if that answers the question enough, but maybe, Dee, you've got some thoughts to add on that, too?

Dr. Diana Lewis: Yeah, I would only add that we have to think about the audience. And so, if the audience are Western-trained scientists, we need to speak to them. If the audience is other Indigenous communities or people that are familiar with working with community, we can talk about it from an Indigenous knowledge perspective.

And so, in Pictou Landing First Nation, we worked with the Elders in the community who shared a story about what had happened to them in the first few days of effluent flowing into this body of water next to their community. And it was almost like 50 years after the event, and almost without exception, the Elders would be very traumatized by recalling this memory and would cry, and you knew that that story that they were sharing about what had happened and what they had witnessed still was very painful for them. And when we shared an article in the last webinar linking land dispossession with Indigenous ways of being, and if you look at that article, you can see, from a Mi'kmaw perspective, the way that we relate to the world around us when it gets disrupted, what that

does to us as Mi'kmaw people. And so, you can't convey that with Western knowledge, Western science. It has to be conveyed through Indigenous knowledge, like *Etuaptmumk* knowledges, and words, and Mi'kmaw words.

And so, I think, like I don't know about how people are responding to the concept of *Etuaptmumk*. For me, working with my own people, I respect their cultural framework, but in each of the communities that I work with, we also have a cultural framework that's relevant to that community. And so the same approach, we work from Western science and from their cultural perspective.

Denica Bleau: Yeah, thank you for sharing that. That's so important with the relationality, and as has kind of been mentioned, being humble enough to sit back and take direction from community and be corrected. Which goes into our next question: in building relationships with community, what are the steps taken when mistakes are made unintentionally?

Dr. Diana Lewis: Well, I don't make mistakes, so I'll hand it over to Heather.

Dr. Heather Castleden: Well, let me tell you that I've made lots of mistakes. I don't know if there are steps. Hopefully what you're picking up is that [...] it's not a cookie-cutter response to that. I think it really depends on relationships. But I would say that when a mistake is pointed out to you, accept that as a gift because more often than not people won't say, "You've made a mistake." And, it's a sign of respect that they're willing to teach you when you've made a mistake. So, really embrace that. As hard as it is to be reminded of, "You don't know everything." It's humbling and I'm always full of gratitude, because I will never forget it where I might have made an error.

In terms of other mistakes, I think about trying to deal with it face-to-face, I think is really important. And making amends, and asking, "Are there protocols that I should be following that I don't know about around making mistakes?" And people that are in your Advisory Circle – so again, the value of an Advisory Circle cannot be understated – to be able to say, "Look, this happened. I feel like it didn't go well. Is there something I should be doing?" So, getting that kind of direction, I think, is also really helpful. And then when we're talking about bigger mistakes, and I think maybe more around the idea of ethics breaches, there's more to it than that, but maybe I'll just leave it at that for now.

Denica Bleau: So, this next one kind of talks about larger government organizations. So, do you have suggestions about how to respond within government organizations when we are not the researchers, but others are, and we become aware or concerned about colleagues that are not going about in the CPBR in a good way? Kind of navigating that relationality, it sounds like, too.

Dr. Diana Lewis: Yeah, I worked for government, and so that's a real dilemma, for sure. There's so many constraints on people that work within government in terms of having unions so that people

have rights that are protected, and there's a lot of restrictions on what you can and cannot do. But if government wants to truly work in a relationship with Indigenous communities that respects and embraces reconciliation, we can't have people doing this kind of work. And there has to be some change within government – when I recommended earlier, there really has to be a change in how rigid government is and how policies and procedures and timelines are so prescribed, that even the people that get selected to do this work should have a competency, at the minimum, and should have a commitment for a long-term engagement with community. I hear so many times people are coming in, they spend the two years that they're in a position getting to know the community, and then they switch a job and then you've got to start over again with a new person. I really don't know how government is going to confront this without making some real structural changes about people that have been trained, that have the cultural competency, that have the respect that is needed to work with our communities.

Heather, I'll just maybe let you add anything?

Dr. Heather Castleden: Well, I think you hit the nail on the head there. I think a suggestion would be to share a recording of this webinar, could be a first start. So, make use of existing resources to share with your colleagues: "Hey, you should check this out. This is, something that I came across and attended, and if you didn't, there's some pretty key messages in there about how to work in a good way."

The second thought I had is, that those of us who are working in this space and trying to do it in a way that is respectful of Indigenous jurisdiction and autonomy and sovereignty, is that we also have a responsibility to educate our colleagues and our senior leaders in this space. So, I hear time and time again about, "Well, we don't know what to do" or "We know what to do, but we don't know how." And so doing some deep learning on that is more than just a webinar, I guess, is kind of what I'm saying there. But taking responsibility to educate, but then also taking responsibility to report. And so, when you're aware that – like if you are concerned about colleagues who are not doing CBPR in a good way – and I think you were saying like when within a government organization, when you're not the researcher, if somebody else is being contracted to do that, pull the contract. If it's a colleague, surely there are systems of, I don't know, evaluation and peer evaluation, but also if the person that you're dealing with is not able to listen to what you have to say, like if there's power dynamics at play or what have you, then also doing an appropriate report to your senior line manager, or however that works, to let them know this is problematic. Because it's not just a feeling that you're uncomfortable with, it's affecting an entire community possibly, an entire Nation, and it's affecting the reputation of your organization.

So yeah, dealing with problems up front and as quickly as possible, I think, is really important. Similarly to what Dee's point is saying about how, in government, when you're dealing with such a big

bureaucracy and there is so much movement – a really clear example of that was working with the Maa-nulth Treaty folks, including Huu-ay-aht, over the years. It took 20 years to negotiate that final agreement. And in the years leading up to it, the relationships that I heard Huu-ay-aht talk about with the feds and the province was that those relationships were actually quite good because they had time together. Yes, they had some serious treaty table talk, but they also had dinner afterwards, you know, and so that relationship part matters. And the minute that final agreement went into effect, all those relationships that Huu-ay-aht had developed with the governments of BC and Canada were gone because now there were new people in the implementation side, on both the province and the government. But Huu-ay-aht rules didn't change, those governments did, and so then you're starting at ground zero again. And so that was extremely disruptive in trying to implement the treaty in the early years, for sure. Thanks.

Denica Bleau: Yeah, and I think as we were saying, similar to research within these other contexts, it's so much about time and relationality, and that commitment to long-term.

So, thank you so much for sharing – to both of you guys for sharing that. We've come to a close. There was more questions, so many beautiful questions, such a beautiful presentation with stories. I learned so much as a PhD student, I'm like, "Wow, I need to send this to other students." So, thank you again so much to Dr. Heather and Dr. Diana.

I'll just note that we encourage everyone to complete the webinar survey. The link is in the chat, and you'll also receive an email with the link tomorrow, so that'll come tomorrow.

And again, kinanâskomitin, Dr. Heather, Dr. Diana, for all the work you guys continue to do, just your accountability to community, to each other, sussing out individuals as we go on, and just reminding us to be humble. If you want to say any other closing words as we close up, but thank you so much.

Dr. Diana Lewis: If I could just mention to people, we have another webinar coming up on March third: *Indigenous values vs. Western economic values in impact assessment*, and March 31st, *What is distinctions-based health impact assessment?* And so, I will say Wela'lin to you, Denica, and Wela'lioq to the audience.

Dr. Heather Castleden: Likewise, thanks so much for having us NCCIH, and Denica for hosting. And see you next time, Dee.

Dr. Diana Lewis: Yep.

Dr. Heather Castleden: Thanks, everyone.

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