

Centre de collaboration nationale de la santé autochtone

Podcast: Voices from the Field 37 – Indigenous knowledges and pandemic science: A conversation with Dr. Nicole Redvers

Description

In this episode, guest host Nicole Halbauer speaks with Dr. Nicole Redvers, a member of the Deninu Kuę First Nation and Associate Professor at Western University. Dr. Redvers contrasts Western science and Indigenous science, details the worldviews that underpin and shape them, and evaluates their potential to mitigate complex planetary health problems such as pandemics.

According to Dr. Redvers, an Indigenous approach to pandemics would include recognizing and better understanding the interconnectedness between humans, animals, and the environment, which could lead to taking preventive measures like tackling deforestation and loss of biodiversity. She also recommends engaging Indigenous people and communities in areas like education, international policy, environmental advocacy, and land stewardship.

Finally, Dr. Redvers describes her own path from a small Indigenous community in the Northwest Territories to becoming an internationally recognized scholar, realizing early on the importance of studying in, and about, Western institutions and knowledge systems in order to change them, and better "leverage them to do good".

Bios

X'staam Hana'ax (Nicole Halbauer)



X'staam Hana'ax (Nicole Halbauer) is a member of the Ts'msyen community, Kitsumkalum. Nicole belongs to the Ganhada p'teex (clan) of the Waap (House) of K'oom. Nicole's advocacy work for the residents of northern British Columbia spans over a decade. She has worked tirelessly to bring decolonized governance to community organizations.

Beyond her professional roles, Nicole is deeply committed to her family. She and her husband have raised six children, along with a few nieces, nephews, they are also blessed with two amazing grandchildren, all of whom hold a special place in her heart. Nicole's personal experiences have deeply influenced her community advocacy.



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Nicole Redvers



Dr. Nicole Redvers, DPhil, ND, MPH, is a member of the Deninu Kuę́ First Nation (Northwest Territories, Canada), and is an Associate Professor, Western Research Chair, and Director of Indigenous Planetary Health at the Schulich School of Medicine & Dentistry at Western University. She also currently serves as the Vice President Research at the Association of Faculties of Medicine of Canada (AFMC). Dr. Redvers has had previous appointments in both the Department of Family & Community Medicine and the Department of Indigenous Health at the University of North Dakota where she helped co-develop the first Indigenous Health PhD degree program in North America. She has been actively involved at regional, national, and international levels promoting the inclusion of Indigenous perspectives in both human and planetary

health research and practice. Dr. Redvers sits on the Canada Research Coordinating Committees' Indigenous Leadership Circle in Research (ILCR), and is a commissioner on the Lancet Commission on Arctic Health as well as the Lancet Commission on the Prevention of Viral Spillover. She additionally sits on the steering committee for the Planetary Health Alliance (PHA) based out of John Hopkins, and is an advisory member to the World Health Organization (WHO) Technical Advisory Group on embedding ethics in health and climate change. Her scholarly work engages a breadth of scholarly projects attempting to bridge gaps between Indigenous and Western ways of knowing as it pertains to individual, community and planetary health. Dr. Redvers is the author of the trade paperback book titled, 'The Science of the Sacred: Bridging Global Indigenous Medicine Systems and Modern Scientific Principles'.

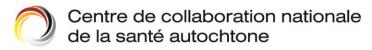
Transcript

-Music-

Nicole Halbauer: Welcome to *Voices from the Field*, a podcast series produced by the National Collaborating Centre for Indigenous Health (NCCIH), which focuses on innovative research and community-based initiatives promoting the health and well-being of First Nations, Inuit, and Métis peoples in Canada.

-Music-

Nicole Halbauer: [Indigenous language used]. Hello. My [Indigenous language used] name is X'staam Hana'ax, my anglicized name is Nicole Halbauer. I'm from Kitsumkalum Raven Clan and Ts'msyen Nation in the House of K'oom in northwestern British Columbia.



I am very happy to share that I'll be your host for today's podcast, and we have the great pleasure of speaking with Dr. Nicole Redvers today about Indigenous knowledge and pandemic science.

It's such an honour to have you here today with us Dr. Redvers, and I'd like to invite you to introduce yourself to our audience.

Dr. Nicole Redvers: Mussi Cho, thank you. Happy to be here today. It's a bit of a rainy day where I am, but it's a perfect day for having a conversation and a cup of tea.

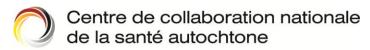
[Indigenous language used]. My name is Nicole Redvers. [Indigenous language used] is my traditional name, and I'm a member of the Deninu Kue First Nation up in Treaty 8 Territory, otherwise known as Denendeh, or Land of the People - otherwise known in today's times as the Northwest Territories. I was born and raised up there in my home community but also, in addition to Deninu Kue or Fort Resolution, as it's noted, I also grew up... had the privilege of being on the lands of the Kátł'odeeche First Nation and West Point First Nation for most of my schooling years, which is in and around the Hay River area just on the south tip of Tu Nedhé, or Great Slave Lake.

Currently right now though, I'm calling in from the traditional homelands of Anishinaabe, Haudenosaunee, Wahnapitae, Potawatomi peoples here in Southwestern Ontario, based at Western University at the Schulich School of Medicine and Dentistry. And [I'm] just really enjoying the leaves coming in and the grass is green, and the birds are chirping, and the geese are running around with their babies a little bigger. So, it's just a nice time of year.

Nicole Halbauer: It is. I'm at my daughter's house right now and her lilac trees are like 50 years old. Oh, the smell in her yard in her house is magnificent. Lilacs, they just give everything that spring feeling.

Dr. Redvers, we met first in a different webinar, and I was so intrigued by our discussion about pandemic science or Indigenous knowledge that I just really had to have further discussion with you. So, in your experience and from the work that you do – your particular vantage point – what does Indigenous science mean to you?

Dr. Nicole Redvers: It's a good question, and I think from all of our communities, we often have different interpretations because of course the terminology of science, per se, is not really a word in our community. I'd be curious to see actually how communities would sort of embody that concept within their traditional languages, generally. But in today's world, of course thinking about knowledge translating, our interpretation of what would be a very strong and long-standing science in our communities to a Euro Western-centric sort of approaches to their understanding of science. And back a few years ago, now maybe 3 or 4 years ago, we got together a group of Indigenous scholars: Knowledge Holders, Elders, land defenders, and we were trying to come together to determine



through a consensus process from all of these global regions, what were the key determinants of planetary health. And what that means – in a simple way – what are the things that help to make the planet well and what are the factors that need to be in place to make the planet well?

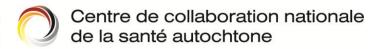
And part of that discussion was around the barriers of the modern scientific paradigm as actually a determinant of planetary health or a factor that can affect the health of the planet, not necessarily for the good. Because the way that the group saw it was that Western science has always been this paradigm that uses a specific scientific method that has been used to make theories or create hypotheses, find variables and measures, and describe relationships, these kinds of things, and usually they've been in mathematical terms, economic, or even political terms sometimes.

However, the paradigm of Western science has been very limited in being able to explain complex relationships, particularly complex relationships over time or over long periods, and can really be very linear. It can be very compartmentalized or reductionistic and very mechanistic, mechanical in its operations. And overall, really appreciating that the overarching interest of Western science has often been to infer or think about phenomena, to understand the world, however, through a really underlying implicit and sometimes explicit way of trying to influence control or perhaps even modify the environment phenomena for human benefit and for human benefit alone, even if it's not really explicit. Oftentimes the kinds of research questions that are asked, the kinds of research studies that are created, often are to benefit humans.

Whereas if we think about from an Indigenous science standpoint – and really, my meaning of that is more of a systems-orientated, ecologically-based, networking or community approach that really is more aligned with the understandings of complexity. And the group, as a definition, defined Indigenous science or described it as being very contextual, holistic, symbolic, nonlinear, relational, not limited by time, and really uses the collective observation of Indigenous Peoples to explain natural phenomena, both through real but also metaphoric narratives. Not that metaphoric narratives give any demeaning to the process, but it's just our way of explaining things, the connectivities in the world.

I often say in many circles that we can't solve complex problems from the same worldview that created them in the first place as it continues to perpetuate and a disconnect between us and the planet as relatives. And that, kind of, is the culmination of the platform of the difference between Western science and Indigenous science.

Nicole Halbauer: That's incredible. There are so many places, in my experience, where if we had just embraced the nuance and understood nuance in the situation, whether it's in governance or it's in systemic change, and we went back to making sure that we were being really grounded in relationship with each other, with the environment that we're working within, that we would have better outcomes. I feel like this completeness that you're talking about in Indigenous science is one that really takes us back to ensuring that we are working together as a collective rather than reinforcing a hierarchy that



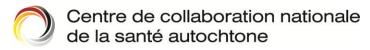
is ultimately damaging all of us and our planet. Our shift is not changing to, but back to, one that incorporates actual health and well-being instead of individualistic paradigms of what's best for me as an individual, but how can we improve it all with everybody, and I think that's fantastic.

We were talking about, before in our other webinar, discussing pandemic science and that was something I hadn't really thought of before. Like when we're talking about pandemic science, what do we mean about that? What is pandemic science? How does it impact us? Those kinds of questions. What do we need to know about pandemic science?

Dr. Nicole Redvers: Yeah, well, it's a really timely conversation because the World Health Assembly is going on right now in the world, and yesterday a Pandemic Accord was just finally passed, which was an agreement between World Health Assembly nations around the world to agree upon certain principles of prevention and response for pandemics. Which of course, pandemics are large-scale events that are often derived by viral spillover, most often usually from animals to humans, where a virus is able to mutate and be able to spread human-to-human in a very efficient fashion that basically encompasses the entire globe. And pandemic science really seeks to understand that phenomenon better in some ways.

Now there's a lot of dynamics, and one of the projects that I'm involved in right now is The Lancet Commission on the Prevention of Viral Spillover, which of course is the predetermined step prior to a pandemic actually taking place. And part of the issue with the Pandemic Accord that was passed, in my mind, yesterday is that there's a large focus on the pandemic but not of the cause of the pandemic, which is viral spillover. But viral spillover is not even the cause of pandemics because for a virus to be able to spill over, you usually need other factors to be in place that are increasing, and those are things such as deforestation, which is causing stress in animals and decreasing their immune systems so they're not able to fight off their own viruses as well. It means encroachment on forests so that wild animals are coming in closer proximity with livestock and other kinds of animals that we rear for our own purposes, as humans, without the benefits to the animals themselves, which causes higher chances against these kinds of spillovers. And then the kinds of commercial farming practices that we have, which puts thousands of birds in the same area, which increases the risk, of course, of transmission when these events happen. So ultimately, when we talk about pandemics, it's really about how we take care of our relations, which is our relationships with animals and our relationships with the planet.

So, the problem I find with the pandemic approach, which often takes sometimes a One Health approach – considering the health of animals and the intersections with infectious disease – is that we kind of align these separate sectors: we have humans over here, we have animals over here, we have the environment over here. And I think for pandemic science to move forward in a good way, we need to stop this narrative of aligning so-called separate sectors, such as human, animal and planetary health, but instead seek to better focus, to describe and operationalize instead the interconnectedness



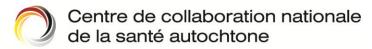
between the systems with the focus on relationships instead of on the variables alone. And when we focus on relationships between variables, as opposed to the variables themselves (the individual animals or the humans), while being inclusive of Indigenous traditional knowledge systems that embody this way of science, innately we'll have a better chance of dealing with the multiple crises, including the pandemic, but also inclusive of biodiversity loss, which of course fuels pandemics and even climate change.

So, the process of what [are] the causal implications or the causal factors of pandemics is still described as viral spillover, yet when in actual fact there's some foundational issues that often stem from colonialism, like our relationship and our treatment with animals and the land, that fuels the risk profile of the pandemics that we see today.

Nicole Halbauer: Wow, I really find it interesting that we don't talk more about what you're saying about the planetary health, the deforestation, the encroachment – all these colonial things that have happened to our environment should be really a part of the fabric about talking about pandemics. Rather than treating symptoms after they occur, let's take a look at why we're having the pandemics. I think the holistic viewpoint that you're bringing forth is such a strong and powerful one that we need to spend more time focusing on as policymakers. So, I was wondering, do your experiences or your scientific knowledge have any implications to federal policymakers thinking about pandemic preparedness and response?

Dr. Nicole Redvers: Yeah, absolutely. I think The Lancet Commission work that I'm involved in now is an international consortium of scientists and folks that are working on this question of how to be able to prevent viral spillover, and a lot of the conversation has been around primary drivers, including conservation, including how we treat animals, including deforestation issues and climate change, and our relationships fundamentally, and our values with how we relate. And ultimately, my hope is the work will give some better clarity to governments that we can't keep talking about only vaccination, testing, screening, we have to go back steps before that because it's more cost-effective. There's clear economic data to show that if we put money into primary prevention, it will save money later. But as we know, trying to get government to invest in prevention on anything is usually challenging with the short-term election cycles; but of all of the things of importance to spend preventative money on, definitely it's dealing with primary drivers of pandemics. And right now, there is very little to none discussion in the pandemic planning process that's happening within Canada and, in my mind, we're really missing the ball on this.

So, I would encourage federal policy makers to keep abreast of this Lancet Commission work that's ongoing, and hopefully the report will be out in the next 6 to 12 months, with a number of papers coming out. In fact, we just published one a couple days ago, actually, looking at an evaluation of public policies for pandemic prevention that was globally in nature. One of the key gaps that was noticed was the complete lack of community involvement and community engagement as part of the



evaluation of policy implementations. A lot of pandemic policy tends to be decisions that are made at very high tables without communities involved in that, and considering the nexus of wildlife and humans being the conversation for spillover, we really need more involvement of communities in those conversations and helping people understand that the real issues are our treatment of the environment and animals.

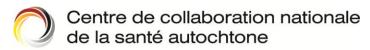
Nicole Halbauer: What is it called, The Lancet Report?

Dr. Nicole Redvers: So, Lancet Commissions are commissions that are funded by various entities, but they're housed through the Lancet Journal and they're focused on different topic areas, and this one, in particular, is focused on the prevention of viral spillover. The name is The Lancet Commission on Prevention of Viral Spillover, and they do have a website on The Lancet with some preliminary information. We've had a couple of papers that have been published so far but the actual report won't be out for about 6 to 12 months.

Nicole Halbauer: That's really great. So people can access a few of the papers that have been published on the website and then wait for the report as well and have access to that. Especially our elected leaders, we need to know how to change policy and implement and allocate funds in order to deal with the primary drivers, so we're not constantly in a pandemic cycle going forward.

One of the things we found in the last pandemic, and one of the presenters in the webinar that you and I were in was mentioning some of the complications with First Nations, Métis, and Inuit communities around the pandemic, and you mentioned the community involvements. I'm just wondering: do you have any comments on how to have our communities more engaged so that they feel like they're part of the process? Because it's meaningful and it's appropriate for the communities so that we can protect our environment, our communities, our health, and we can also work towards those primary drivers that you talk about. Because I think the fact that those primary drivers are not linked to pandemics is really key, and we need to get that kind of information out in ways that it can be heard to and actions can be implemented. What are your thoughts?

Dr. Nicole Redvers: Absolutely. Definitely, I think there needs to be better community-based education around the importance of the connectivity of land and animal health, and the health of humans generally. And this is going to be increasingly amplified even in crises like the climate crisis. And one great example, of course, is with the permafrost melting, there's increased likelihood of dormant viruses waking up from the ice that have the potential to cause problems for humans, let alone, of course, the risks that are perceived by public health entities of people engaging with wildlife, which in my opinion is a very sensitive issue because a lot of the conversation has been around, "Well you need to prevent wildlife contact with people to prevent pandemics." But of course, for our communities, we've known how to interrelate with wildlife for thousands of years, so our people need to be attuned to the fact that these are the kinds of conversations that are happening at the



international level. We need to make sure that our voices are heard so that their rights are protected and the Canadian government is not just following international policy without considering Indigenous viewpoints around our interactions with wildlife, and making sure that our rights-based approach is seen independently from some of the other wildlife and commercial farming policies that may or may not be adopted after this now agreed upon pandemic report is occurring.

So, there's the rights-based education approach that's needed for communities, and making sure that we're clear, that we are not having effects to our fishing, to our hunting processes around this. But number two, recognizing that the environment is a key driver, and in our relationship with it, Indigenous Peoples can actually be the ones that are standing up for the environment in this way and helping to educate governments, in my mind, about these connectivities. And I think for us as people to be able to acknowledge, which we've known for thousands of years, the health of the land is the health of us. But this is more important in the context of pandemic prevention planning and it gives us another public health lens – in addition to all of our other rights-based lens – to advocate for [the] health of lands, protection of forests, land back movements, these kinds of things. And the importance of Indigenous land conservation and stewardship for pandemic prevention in the context of these things is an underutilized tool, in my mind, that our Indigenous communities, I think, could leverage successfully, not only here in Canada but in many other places of the globe.

Nicole Halbauer: Dr. Redvers, I could listen to you talk all day. You really bring forward all the things we intuitively know in our communities, and then you bring them out in a way that also fits the Western academic paradigm so that more people hear it. And so, I really appreciate that. I love anything that's rights-based, and the fact that you say the health of the land is the health of us – that's such a concise way to really express that value and that interconnectedness, and I think that's really important.

But I'm just wondering – I'm just in my academic journey and I'm sure there are a lot of people out there that are going to be really interested – if there were two resources you would suggest for leaders in community (local, small community leaders) to go to their local bookstore and purchase or find online, do you have two things you would suggest as basis for reading going forward?

Dr. Nicole Redvers: There's a number of different angles, I think, each with its own different avenue of potential advocacy. So, I'm just going to stick with – from my perspective – what I think could be helpful for communities to create more synergy, and the kinds of language that we're using at provincial, national and international tables, and that is the terminology around planetary health. And there's a paper that we wrote, which I had noted at the very beginning, describing the Western science versus Indigenous science sort of component, and the paper was <u>The determinants of planetary health: An Indigenous consensus perspective</u>. I love that paper because it represents global voices of Indigenous Peoples, but in my mind, really in a clear way, sets forth what I've heard multiple times from communities as being key elements that need to be in place for the health of the planet.



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So, for example, one of them is respect of the feminine, which we've lost in our communities. The majority in Canada prior to colonization, being matriarchal, ancestral legal personhood designation, which is something that we haven't considered to a full extent, I think, in the Canadian context, especially at how it relates to our treaties and whether or not we give rights to nature, as part of colonial systems, for their own protection, despite some of the inherent limitations. Whether that's right or wrong, I don't think we've had enough conversations around that in our communities. The understanding of our human interconnectedness with nature, which we all embody naturally, but how to be able to communicate that to policymakers as a premise for negotiations. Self and community relationship and our governance and law, but how it actually is framed in the paper, in my mind, is really clear in how that perpetuates disconnect from planet and harm to the planet.

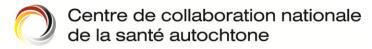
And then finally, you know it highlights how important Indigenous health is in the context of recognizing that Indigenous people currently steward 80% of the remaining biodiversity on the planet (1/3 of the old growth forests). So, if Indigenous Peoples have their health and well-being, their cultures, their languages, their sovereignty, their self-determination, they're able to continue to steward 80% of the remaining biodiversity (1/3 of the old growth forests), which not only benefits Indigenous Peoples, that benefits all. Indigenous Peoples are healthy and taking care of their lands; the entire planet is healthy.

So there's a lot of things I think that could be leveraged in that paper for framing why it is important that we do what we do, why it's important that we have funding for land-based healing programs, and why it's important that we have funding for Indigenous languages, which is another determinant of health that's framed in there.

So that's one resource I could think of off the top of my head that we've found very useful in conversations around the globe – around this topic.

Nicole Halbauer: Can I ask you a couple of questions about your journey? Let's start at the beginning: how did you become a doctor? Just tell me a little bit about your journey to becoming a doctor and gathering all this knowledge. It's just so inspirational to so many people, what you do, and it has such a huge impact, but you're so quiet about it.

Dr. Nicole Redvers: Yeah [...], I mean, we come from small places right up north, and we're really up north – I always joke when people down in London, Ontario tell me they're from up north, and it's a couple hours from here – but I never even had the thought about being a doctor growing up. Like many of us in our communities, I had guidance counselors push me down non-academic tracks because I don't think they believed I could do what I could do, like most kids, right? And I ended up graduating not doing the academic math, for example. And when I was halfway through university, I ended up walking into a wrong talk – because I went into Kinesiology because up north, all we do is sports, so that's all I had in my mind at that point of what to consider – went to a talk about



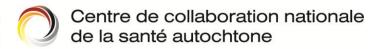
naturopathic medicine. It was the first time I had ever heard about naturopathic medicine generally and I was kind of shocked that there was a profession where I could learn about plants but also get a medical education at the same time and decided the next day to switch my degree. But I realized it wasn't so easy because I didn't do any of the academic programs in my high school that would give me the prereqs to be able to take those courses that I needed to apply to that program.

So, I ended up having to upgrade grade 12 math in college alongside my full courseload for university because I never was pushed to do that. And it made me really frustrated, actually, at that point because I realized that I probably could have done that in high school if somebody had told me that I could have done it. But our guidance counselors [were] just maybe thinking that we're Indigenous, so we couldn't possibly be smart enough to do that kind of work. But anyway, I managed to get through and take the high school courses, upgrading alongside my university program, and ended up getting into the program.

So, I became a naturopathic doctor, [I] worked in my home region for about 11 years running an integrative clinic up north in Yellowknife, and about halfway through, started to recognize that a lot of our health issues were difficult to solve in the confines of a clinical exam room, and the majority of our issues were structural and due to a strong structural marginalization, racism, all of these components that needed a wider lens to be able to tackle.

So, at that point we got together with Elders from my region and we created an organization called the Arctic Indigenous Wellness Foundation, back in 2017, for the purposes of starting what, I think, was maybe the first at that point — an urban land-based healing program. A lot of the land-based healing programs [were] around in the land, but we wanted to target an urban space because many of our particularly unhoused relatives didn't have the circumstances, sometimes, or the abilities to get out on the land very easily, and we wanted to bring the land to them. So we created the program; we offered traditional healing and traditional counseling services, all done by Elders and Knowledge Holders from our region, and slowly from there started to build out the programming to target, again, those that wouldn't be coming to an office, or to a clinic, or to a place, but would be more than willing to come to a bush tent or a tipi to receive services that way.

And it really opened my eyes to the importance of our own ways in developing public health programs and prevention programs. And it's been an operation, actually, for eight years. It's still open today, all year-round, offering services. There's a nice video – it's actually called [...] – if people type in "Healing Hearts" on YouTube: "Healing Hearts," comma, "Redvers" – there's a short little video that showcases the work of that camp. That was probably one of the things I'm most proud of, not because it was me or my work, but really a combination of collective efforts. And realizing that it's not about creating the solutions in our communities; sometimes it's about creating the space, and then once you create the space, the solutions arise in that.



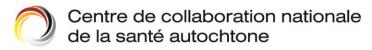
And that really motivated me, to be honest, in moving into academic spaces, even though I never, ever thought, in 100 years, I would ever be in a university because of all of the trust issues and the views we have of institutions. And it was only a program in in the United States that was going to be developing the very first Indigenous health PhD program, and they were bringing together a group of Indigenous providers, healthcare providers, and researchers together at this university, that it was just too enticing to not be a part of that and be able to mold that program in a very decolonial way. That was the steppingstone into another kind of space outside of clinical care. And [I] recognized very quickly the opportunity to leverage institutions for good and be a buffer in providing resources to communities, getting resources to the ground, and also being able to knowledge translate some of the community issues into these larger spaces that I would have never had the opportunity to do if I was still back in my clinic in Yellowknife.

Nicole Halbauer: That's absolutely inspirational. I've been in health administration since the 90s, and I'm amazed at how much has changed but how much has clung on to its old colonial ways and continues to do the harm. So, it's always so refreshing to hear about things that have lasted eight years and made real impactful change in people's lives and in communities. That's amazing.

I just have one more question for you, if that's alright: for all of us kids that got put on the basic graduation program instead of the academics and are now finding our way back into universities – because we figured out that we were just as important and smart as the other kids in the class – what advice do you have for people new to the world of academics, new to the world of research, and just going back to those same universities that in the 90s and 2000s had so many barriers to keep us out?

Dr. Nicole Redvers: Yeah, it's something I'm really passionate about, having gone through that experience and being a probably quote-unquote "mediocre student" – although I wasn't failing by any means, I got by – but not being pushed or given the opportunities to understand that I did have value in the way I was raised. And the proof of that now is being able to go on and become a naturopathic doctor, but I got a masters, I have a PhD from the University of Oxford. I never thought I would have the smarts or the ability to do any of that; it wasn't even in my frame of mind. And that's not to point anything out to myself, it's just to demonstrate that despite what other people say, or even what we think of ourselves, we have a lot of potential and our knowledges are valued if we apply them in the right way.

I've always seen institutions not as a place to get sucked into or to go along with the ways – one of the most important ways to change systems is to understand it better than itself. So, I always approached university, "I want to know that system better than it knows itself, so I know how to change it." And when I'm taking a course, if I don't agree with it, I force myself to understand it so that I know how to change it for later, and that really helped my framing. If programs were not appropriate, if they were racist, if the professors weren't supportive, if they were very ignorant in terms of Indigenous ways, I took that as a lesson: those are the kinds of people, these are the kinds of things



that we're up against. How can I learn as much about them as possible so that, again, I know how to work with them or how to change systems, because it's really hard to change systems when you don't understand them.

And there's value in that, in my mind, to take that time, despite the frustrations, recognizing that it's not our systems and that's okay if it's not our systems, but how can we use them, leverage them, to be able to do good and really allow us to reflect, I think, on our differences between non-Indigenous and Indigenous ways of being. And being creative about either the bridging of medicine bundles from non-Indigenous-Indigenous places, because in some ways there is value in different understandings of the world, while at the same time not getting attached to them or not getting emotionally attached to the value that's attributed to them, and keeping ourselves as Indigenous peoples as we move through it all at all costs, I think is a survival tactic.

Nicole Halbauer: Exactly. I really feel honoured to have been able to have this conversation with you. Thank you so much. T'oyaxsut 'nüün, and I'm so honoured to be able to spend more time talking to you. So, thank you so much for participating in this podcast, Dr. Redvers. I encourage all of the podcast listeners to go to *Determinants of planetary health* - what was it called again, the website?

Dr. Nicole Redvers: Yep. So, it's just The Lancet. But if you type in "The determinants of planetary health", comma "Redvers", it will likely come up.

Nicole Halbauer: So please listeners, go check it out. And if you'd like to hear more podcasts in this series, head to *Voices from the Field* on the National Collaborating Centre for Indigenous Health's website, <u>necih.ea</u>, and music on this podcast is by Blue Dot Sessions. It appears under a Creative Commons license. Learn more at <u>www.sessions.blue</u>.

Thank you again, Dr. Redvers. You've been very inspirational, and I feel ready to go out and continue to do the work that needs to be done while still maintaining my Ts'msyen identity. Thank you, t'oyaxsut 'nüün.

Dr. Nicole Redvers: Mussi Cho.

-Music-

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