DECOLONIZING DATA

UNSETTLING CONVERSATIONS
ABOUT SOCIAL RESEARCH METHODS

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development of new paradigms and different ways of thinking about and doing research (Corntassel, 2012; Kovach, 2005, 2009; Simpson, 2011; Smith, 1999, 2006, 2012). Resistance is about challenging colonial impositions while resurgence is about regenerating knowledge and land-based practices. Resistance and resurgence are necessary components to foster Mino-Bimaadiziwin because they honour and support Indigenous world views with a holistic approach to the good life with an emphasis on culture and tradition.

In future research, if we are to accurately describe the determinants of Indigenous health and wellness, the research must be contextualized in transgenerational trauma and also wellness practices such as land-based traditions and cultural activities. In addition, these determinants need to be linked to specific historical, cultural, political, social, and economic contexts that must be accurately documented. Research designs need to be culturally responsive, which means that researchers need to work in partnership with Indigenous peoples, communities, and/or organizations in a way that avoids misinterpretations and misrepresentations in the knowledge inquiry process. This will support the generation of research findings that are anchored in Indigenous knowledge systems and accurate cross-cultural representations, producing estimates of population health that are better equipped to inform recommendations for health, healing, and well-being. These are the types of new relationships that will facilitate reconciliation because Indigenous peoples, communities, and organizations can re-story the historical trauma on a number of levels and create new ways of understanding and contesting the deeply ingrained structures of inequality.

Another important research question posed at the onset of this study asked, "How does understanding well-being through a decolonizing research approach support an understanding of well-being that can be of direct benefit to urban Indigenous peoples?" This is also directly related to social capital when we consider that we are living in an era of reconciliation. All new relationships between Indigenous peoples and the Canadian government, and non-Indigenous peoples for that matter, will continue to act as a social determinant of health and wellness until we acknowledge and develop empirically based indicators of social relationships to include within Indigenous health analysis. This will require an investigation of contemporary relationships and an understanding of Indigenous sovereignty issues, whereby the FNHA as a self-determined health organization is exemplary. Incorporating this knowledge with theories on social capital in health analysis needs to be further developed to provide a method to identify indicators of relationships that contribute to the health and wellness of Indigenous

peoples. This study is a first step in that direction and has shown how we can build bridges between knowledge systems of different ontological origins using multi-epistemological methods of sociological inquiry. That being said, I have also come to realize that two-eyed seeing has several limitations that I think responsive research is better able to address.

Responsive Research, the TRAC Method, and Indigenous Data Sovereignty

What does it mean to decolonize research? In "Unsettling Settler Colonialism: The Discourse and Politics of Settlers, and Solidarity with Indigenous Nations," Snelgrove et al. make the point that centring Indigenous peoples' articulations is critical to deploying a relational approach to settler colonial power and that practices of solidarity will otherwise reify settler colonialisms and other modes of domination (Snelgrove et al., 2014, pp. 7–9). To decolonize research is an everyday practice that involves the critique of conventional epistemologies and dominant knowledge systems to create culturally respectful frameworks that do not place the value of western ways of understanding over Indigenous ways of knowing. According to Kwakwaka'wakw scholar Sarah Hunt and Cindy Holmes (2015), "While large-scale actions such as rallies, protests and blockades are frequently acknowledged as sites of resistance, the daily actions undertaken by individual Indigenous people, families, and communities often go unacknowledged but are no less vital to decolonial processes" (pp. 157–8). By looking at the everyday, we gain a deeper sense of how relationality, responsibility, and personal decolonization are embodied and practised within a research context. For Indigenous peoples, ongoing colonial policies and practices aimed at eroding cultural identity and the legacy of the residential school system have led other scholars to conclude that severe historical trauma has, as a consequence, been passed through the generations (Brave Heart, 2014; Brave Heart & DeBruyn, 1998; Gone et al., 2014; Maté, 2008; Ross, 1996) and that the legacy of the residential schools still has an impact on individuals, families, and communities today. There are varied uses of the terms to describe trauma in the Indigenous literature, and in some instances the term *intergenerational trauma* is used to explain the transmission of trauma from one generation to the next while *historical trauma* has also been ubiquitous (Brave Heart, 2014; Gagné, 1998; Gone et al., 2014). Indigenous scholars and trauma experts Brave Heart and Debruyn (1998) argue that "Like children of Jewish Holocaust survivors, subsequent

generations of American Indians also have a pervasive sense of pain from what happened to their ancestors" (p. 64). Similarly, Gone et al. (2014) have invited us to rethink the term *historical trauma* by making linkages using historical trauma research with survivors of the Holocaust to identify a comparable cluster of events correlated with massive group trauma across generations. "In seeking to understand the transgenerational effects of historical trauma and processes of recovery, some Indigenous scholars and mental health practitioners have made explicit analogies to the Holocaust and its health impacts on the Jewish people" (Gone et al., 2014, p. 301). The study findings presented in this book have shown that Indigenous peoples experience individual trauma and communities experience collective trauma. The specific terminology of trauma directly pertains to understanding the impacts of trauma when working with Indigenous peoples (Gone et al., 2014).

Understanding how trauma and extractive research processes enhance trauma is an ethical requirement of doing research work with Indigenous peoples. For example, in this book transgenerational trauma is discussed extensively in the findings and framed the research scope, design, and ethical manner by which this work was carried out. With multiple generations of Indigenous peoples and communities having been affected by residential schools, the ongoing trauma affects the economic, social, and political structures in communities and has consequences for systems of dependency and marginalization. At the individual level, we would expect consequences that include increased anxiety, increased stress, and increased use of alcohol (Gagné, 1998; Helin, 2006).

Given the complexity of transgenerational trauma for Indigenous peoples, it is clear that "disrupting the intergenerational transmission of trauma will require holistic and multifaceted approaches to improving health and well-being ... there is a deep shame that is felt by many Aboriginal people that is linked to the processes of colonialism" (Aguiar & Halseth, 2015, p. 23). This shame is felt by individuals, families, communities, and Nations. In order to re-establish a sense of pride in Indigenous identity for individuals and communities and to effectively deal with unresolved trauma, there is now an emphasis on "culture as treatment" activities (Gone, 2013 as cited in Aguiar & Halseth, 2015, p. 23). Research into resilience and Indigenous resurgence has shown that the sense of historical rootedness Indigenous peoples have and maintain through cultural activities helps them cope with issues created through colonization (Alfred & Corntassel, 2005; Gone, 2011; Gone & Kirmayer, 2010: Kelley et al., 2012; Kirmayer et al., 2011, 2012; Kral, 2012; Reading et al., 2007). Ties to land, culture, and community

are essential for survivance, which is "an active sense of presence over absence, deracination, and oblivion" (Vizenor, 2007, p. 3).

Two-eyed seeing offers a way to decolonize research methods and has been widely used in the field of health research. The principle of two-eyed seeing utilizes the strengths of western scientific knowledge and the strengths of Indigenous knowledges to weave back and forth between world views to find the most applicable fit for research (Bartlett et al., 2012). This weaving process gives way to its integrative approach to understanding health and wellness research but is not without limitations. First, it does not actually integrate western methods with Indigenous methods at each stage of the research design process and project life cycle. In turn, this guiding principle of differing world views that run parallel to each other is not as integrative as a braiding method. It is this concept of using two world views, which has also been described by other authors as a way of bringing together of Indigenous and mainstream knowledges (see Archibald, 2008; Kovach, 2009; Wilson, 2008), that enables a researcher to move between world views. Two-eyed seeing was a useful analytical approach for the study I presented in this book because I was able to weave a case study framework with oral histories based in Indigenous storytelling as a way of seeing health outcomes differently.

The Limitations of Two-eyed Seeing

The limitations of two-eyed seeing became apparent to me during community-driven research processes on several different projects. One of the limitations I have noted is that two-eyed seeing is more of a principle than a method per se. It is not trauma-informed, which renders it problematic when working in community and given the nature of research topics such as understanding impacts of resources, development projects, and gendered violence. Two-eyed seeing does not braid Indigenous and western epistemologies together at specific stages in the research process (e.g., research scoping, data collection, data processing, interpretation, and writing), which poses difficulties with praxis. With decades of community-driven research experience between the two of us, Cherokee scholar Jeff Corntassel and I advocate for responsive research and we see it as offering more than a scientific notion of "research responsive to public needs" (Bud, 2014). Responsive research and the Translocal Relationships, Relational Accountability Accountability Mechanisms Community Timeframes (TRAC) method emerged while we worked on different community-based projects nationally and internationally and we see it as an approach that braids Indigenous

and western social scientific epistemologies at each stage of the research process. Responsive research facilitates meaningful forms of relational accountability in community partnerships where research programs are responsive to the short- and long-term goals of Indigenous Nations and peoples. Responsive research emerged in community-based projects when we realized that the main qualitative tools were insufficient (Quinless & Corntassel, 2018). We support Indigenous peoples in the process of owning their community information. We believe that research processes for Indigenous peoples by Indigenous peoples is an important step in self-determination and governance (Quinless & Corntassel, 2018). During our work we applied responsive research in accordance with the following principles:

1. Indigenous communities should work in partnership with researchers to generate their own community knowledge.
2. Throughout the process Indigenous communities should have control of research and data collection processes through agreed-on informed, free, and prior consent.

So how does responsive research fit with other qualitative research traditions? There are five main qualitative traditions used in social science research: phenomenology, ethnography, narrative research, case study, and grounded theory. All can fall under the umbrella of participatory action methods. Participatory action research differs from most other approaches to Indigenous health and wellness research because it is based in the co-creation of knowledge and action with the intention of reducing health inequities through community partnerships and people who are committed to improving their own health and well-being (Absolon & Willett, 2005; Ahenakew, 2012; Castellano, 2004; Corntasell 2008, 2012; Kovach 2005, 2009; Quinless, 2017; Smith, 1999; Wilson, 2008). While aspects of these methods are useful, they have not been approached from a trauma-informed and decolonized lens and have the following five significant limitations that have proven ineffective for some community-driven research projects:

(1) PAR methods are not sufficiently culturally informed and community driven.
(2) PAR methods are not guided by community ethical protocols.
(3) PAR methods do not use a trauma-informed lens.
(4) PAR methods do not provide a strengths-based approach to data generation.
(5) Data curation and digital sovereignty are not adequately introduced into the research design phases of the project.

Through various research projects, we have centred Indigenous ways of knowing through all phases of the research design process. By decolonizing our research activities, we have re-searched knowledge using a strengths-based and trauma-informed approach to these practices. Understanding community ethical protocols has been an important part of how we have been building on Indigenous knowledge (Quinless & Corntassel, 2018). This required a change in conceptualizations of the research process and the development of new paradigms (Corntassel, 2012; Kovach, 2005, 2009; Simpson, 2011; Smith 1999, 2006, 2012) and different ways of thinking about and doing research.

We identify five main tenets of an approach to responsive research through the TRAC method that are guided by community ethical protocols and can be applied when working within an Indigenous context.

(1) The TRAC method has emerged through successful community partnerships with an understanding and response to applying a trauma-informed research practice.

(2) It centres community knowledge and focuses on sustainability of knowledge.

(3) It braids western sociological methods with Indigenous methodologies.

(4) It approaches research from strengths and is not a deficit model.

(5) It incorporates interpretative flexibility, which means using standard research tools with components that reflect cultural diversity and meanings and interpretations anchored in Indigenous ways of knowing, seeing, and understanding (Quinless & Corntassel, 2018).

The TRAC method of responsive research is based in four approaches (identified below) that braid together western methodologies with Indigenous methodologies into different stages of the research design life cycle.

(1) **Translocal relationships** are relationships developed that respect diversity by focusing on localized Indigenous knowledge and place with the intention of developing sustainable, long-term relationships that are mutually beneficial. Future Indigenous Nation relationships emanate from your localized partnerships. This is a useful design when working with various communities in vast geographic regions because it accounts for the specific community contexts at the micro level that can radiate out to other communities.
(2) **Relational accountability** is our ethical responsibility to research. Research partnerships and collaborations are generated in conversation with and by ongoing goals of Indigenous Nations. Finding culturally relevant ways of implementing free, prior, and informed consent is especially important here.

(3) **Accountability mechanisms** honour Indigenous Nations protocols and practices throughout the research design process and research partnership. This is what we do with the information we have been given and a reminder that the research processes that we engage in are just as important as the outcome of the project. Having continuous communication and processes for renewing our commitment of the project will keep the project on track. These outcomes can be integrated into the data processing and interpretation phases of the project and also into writing of the report and knowledge sharing back to the community in ways that will be useful to the community.

(4) **Community timeframes** is a way of honouring the fact that Indigenous Nations have their own sense of time based on place-based relationships, language, ceremonies, familial responsibilities, kinship networks, and sacred living histories (Corntassel, 2008, 2012). As a researcher, it is important that you adhere to the community's sense of time versus imposing your own deadlines and needs. The challenges to completing key informant interviews include the fact that they can take a significant amount of time to complete (i.e., scheduling and rescheduling) and findings from interviews can be challenging to analyse and synthesize (i.e., different stakeholder groups with differing levels of program involvement, differing agendas, and differing understandings of and experiences with the program).

Figure 6 is a display of the TRAC approach that emerged during several community-driven research projects at different stages in the research process. Each of the four quadrants outlines widely accepted practices of research stages that are common among qualitative researchers using social scientific methods and from textbooks that I use to teach qualitative research methods in the discipline of sociology (Ritchie et al., 2013). These stages are Stage 1: Research Objectives and Framing; Stage 2: Research Design; Stage 3: Data Collection; and Stage 4: Knowledge Sharing with the necessary research tasks associated with each stage in the research life cycle.

The TRAC method was developed in response to inadequacies in integrating social scientific and Indigenous methodologies simultaneously. It is reflective of a decolonized standpoint to narrowly defined social science methods and provides more of an integrative research approach compared to two-eyed seeing. While working in various communities, Dr. Corntassel and I realized that, in order to braid Indigenous and western knowledge systems, the following needed to

Figure 6. Responsive research and the TRAC method
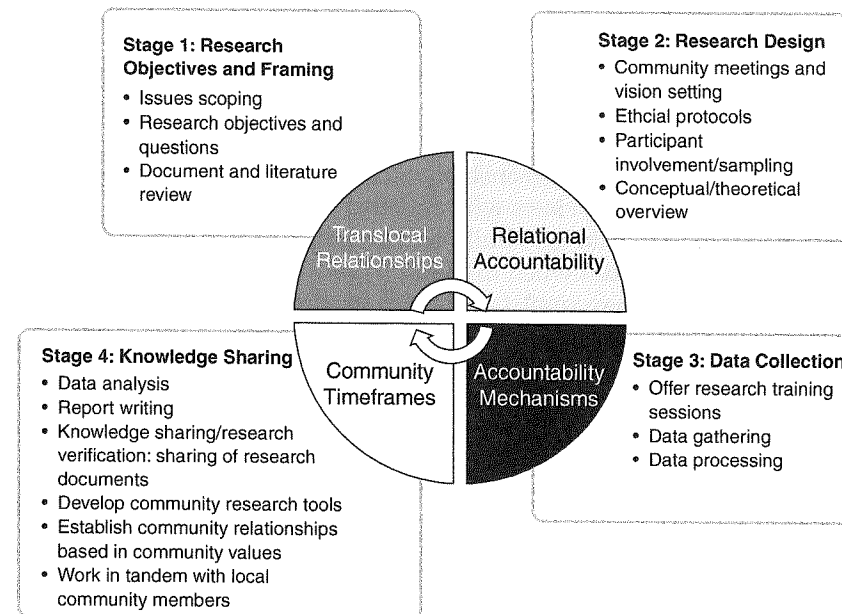
Source: Quinless & Corntassel, 2018.

occur at various stages of the research process and we carried out the following:

• Using a trauma-informed approach in which we held space to witness and listen to participants through compassionate and empathic techniques while gathering data in each of the communities
• Modifying standardized research language (metadata standards) to better relate to Indigenous world views. For example, we changed *data collection* to *data gathering* and *database* to *data tracker*, along with many other research terminologies that were better aligned with Indigenous world views
• Developing meaningful partnerships by supporting community initiatives through out-of-pocket expenses. For example, we have supported local artists; gifted passes for children to attend recreational activities where funds were not available; provided soccer equipment to children living in the communities of Jinijini and Akropong in Ghana as requested to support community

wellness; and ensured traditional foods be provided at research events, which was incredibly important in respecting community protocols around notions of sharing and healing
- Infusing the research process with culturally informed and ethically guided practice by centring Indigenous-specific knowledge, which requires us to decolonize various stages of the research process. We responsively work on Indigenous timelines and reschedule interviews when needed, we engage in several informal conversations to build relationship, and we participate in ceremonial activities when invited
- Looking to the community to identify its strengths in regard to health and well-being and healing from violence
- Supporting development of capacity by providing research knowledge training to build knowledge capacity among community research staff. We have created customized research tools (data tracking systems) and gifted them to community-based organizations and Band offices and administration to support future work endeavours such as grant and proposal writing and business development

Again, the TRAC method of responsive research emerged from a community-driven research project and is based in four approaches that braid western methodologies with Indigenous methods and include (1) translocal relationships, (2) relational accountability, (3) accountability mechanisms, and (4) community timeframes. There is currently considerable interest inside but also outside of the academy in a range of issues associated with decolonizing research methods and Indigenizing health and wellness. It is our wish that this initial discussion of responsive research using the TRAC method will be beneficial in this regard.

Indigenous Data Sovereignty

In May 2016, Canada officially signed UNDRIP and began an attempt to harmonize Canadian law with the standards set in the declaration.[1] This along with the ninety-four Calls to Action of the 2015 Truth and Reconciliation (TRC) are two strong instruments of reconciliation that centre free, prior, and informed consent, which has direct impacts on data gathering. But the methods and arrangements for gathering,

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1 For example, see https://openparliament.ca/bills/42-1/C-262/

processing, and sharing data are not clear. The approach of many government departments and academic institutions is to work with Indigenous communities and organizations to coordinate Indigenous and tripartite initiatives and strategies to forge new relationships. In moving forward with reconciliation it is critical that we unsettle conversations to think more reflectively on how the data rights and interests of Indigenous peoples are secured. Responsive research through the TRAC methodology supports Indigenous data sovereignty (IDS), which seeks to protect Indigenous knowledge that is based on Indigenous peoples', communities', and Nations' own terms. In Canada, IDS movements have already been established through the FNIGC research data practices based in the principles outlined through OCAP, which is trademarked through FNIGC and supported by the FNHA. The FNIGC has provided momentum to the IDS movement in recognizing the rights of Indigenous peoples to govern the collection, ownership, and dissemination of their own knowledge (data). This is based in an Indigenous rights framework in accordance with international declarations such as UNDRIP and acknowledgment of Indigenous peoples' inherent right to govern their people, lands, and knowledge.

The ideas presented in this book centre decolonizing research methods into mainstream sociology in a way that has until now been neglected. I have explained how research design practices need to be culturally responsive, which means that researchers need to work in partnership with Indigenous peoples, communities, and/or organizations so as to avoid misinterpretations and misrepresentations in the knowledge inquiry process. This will support the generation of research findings that are anchored in Indigenous knowledge systems, world views, epistemologies, ontologies, and axiology.

I have explained how various mechanisms of the current colonial system explicitly define and frame questions of well-being – how well-being should be conceptualized, measured, and evaluated for Indigenous peoples – thus failing to integrate Indigenous knowledge systems and world views about health and wellness. This colonial knowledge system has been internalized by many Indigenous communities and peoples, which further colonizes their inner life-worlds (Browne et al., 2005) and serves to validate thinking about and to support a colonial mentality (Alfred, 2008) about what does and what does not constitute Indigenous wellness. The findings in this book come from applying what Alberta Marshall, Elder of the Eskasoni First Nation, refers to as a two-eyed way of seeing health and wellness within an urban context. Two-eyed seeing is uses Indigenous knowledge systems and western-based knowledge systems to provide a holistic lens to understanding