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"Because we have really unique art": Decolonizing Research with Indigenous Youth Using the Arts

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“Because we have really unique art”: Decolonizing Research with Indigenous Youth Using the Arts

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Abstract

Indigenous communities in Canada share a common history of colonial oppression. As a result, many Indigenous populations are disproportionately burdened with poor health outcomes, including HIV. Conventional public health approaches have not yet been successful in reversing this trend. For this study, a team of community- and university-based researchers came together to imagine new possibilities for health promotion with Indigenous youth. A strengths-based approach was taken that relied on using the energies and talents of Indigenous youth as a leadership resource. Art-making workshops were held in six different Indigenous communities across Canada in which youth could explore the links between community, culture, colonization, and HIV. Twenty artists and more than 85 youth participated in the workshops. Afterwards, youth participants reflected on their experiences in individual in-depth interviews. Youth participants viewed the process of making art as fun, participatory, and empowering; they felt that their art pieces instilled pride, conveyed information, raised awareness, and constituted a tangible achievement. Youth participants found that both the process and products of arts-based methods were important. Findings from this project support the notion that arts-based approaches to the development of HIV-prevention knowledge and Indigenous youth leadership are helping to involve a diverse cross-section of youth in a critical dialogue about health. Arts-based approaches represent one way to assist with decolonization for future generations.

Keywords

Canada, Indigenous, HIV, community-based participatory research, arts-based research, youth, decolonization

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Introduction

Art can be medicine, a survival tool, an antidote. Art is our identity, our place, a sign of our presence on this planet. It is medicine as it helps healing because we've been through so many things. Art is for the people. It can help build our communities (Trépanier, 2008, p.15).

A group of Indigenous and non-Indigenous university-based and community-based researchers, youth, students, and community activists (some of whom hold several of these identities) came together to envision decolonizing approaches to respond to the elevated rates of HIV in Indigenous communities in Canada. The approach was grounded in historical understandings of ongoing colonial and structural violence, respect for the self-determination of Indigenous Peoples affirmed by the United Nations (2008), and a desire to work with youth to create opportunities for them to connect with their culture while building on their strengths and resilience. This community-based participatory action research project is called *“Taking Action! Building Indigenous leadership in HIV prevention using arts-based methods.”* This three-year study underwent ethical review at York University, the University of Toronto, and McGill and McMaster Universities. The study design was also reviewed by participating Indigenous communities. This paper describes how Indigenous youth felt about using arts-based approaches to engage in discussions about their health, and makes a case for using arts-based research approaches when investigating health issues with Indigenous communities. For the purpose of this project, ‘youth’ were defined as people between the ages of 13-29.

Indigenous Worldviews, Resistance and Reclamation

Indigenous worldviews that value holistic interconnectedness, collaboration, reciprocity, spirituality, and humility stand in stark contrast to Western notions of dichotomous thinking, rationality, and individualism (King, 2003). Despite historical and ongoing state-sanctioned social, physical, economic, and cultural violence (Razack, 2002; Smith, 2005), many Indigenous communities in Canada have preserved their worldviews and demonstrate ongoing resilience in the face of injustice and inequality (Kovach, 2009; Simpson, 2011).

First Nations, Inuit, and Métis people in Canada are diverse in terms of land base, language, culture, and political organization. Nevertheless, many Indigenous communities share a deep spiritual connection to the land and place (or place as a social determinant of health). In addition, Indigenous communities have long relied on ceremonies and oral traditions to pass knowledge from one generation to the next. Drumming, singing, carving, weaving, and beading continue to be considered important forms of storytelling. Traditional knowledge is transmitted through myths, legends, stories, dances, images, and experiential learning. The arts are aesthetic, functional, and sacred endeavours that continue to be used for communication, teaching, and values transmission (Muirhead & de Leeuw, 2012; Trépanier, 2008).

Indigenous communities in Canada also share a common history of colonial oppression that sought to disrupt every aspect of their lives (Gracey & King, 2009; Reading & Wien, 2009). The Indian Act, passed in 1876, was designed to assimilate and “civilize” the “Indian.” It regulated legal status, land rights, commerce, and inheritance laws, and made all “Status Indians” wards of the Crown. In 1884, it was amended to destroy Indigenous cultures by such measures as banning potlatches. It outlawed cultural expressions related to ceremonies and gatherings, such as dances, songs, regalia, masks, and musical instruments (Trépanier, 2008; Waldram, 1997; Warry, 2000). The Indian Act has been amended several times. For many years, it sanctioned the forced removal of Indigenous children to Residential Schools where they could be brutally

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

punished for speaking their language and practicing their traditional ways (Aboriginal Healing Foundation, 2003). While some of the more egregious elements have since been repealed, this racist legislation is still in force today (British Columbia Assembly of First Nations, 2012; Warry, 2009).

The harmful impacts of theft or appropriation of ancestral lands, reserve systems, residential schools, and oppressive child welfare and criminal justice systems have reverberated for generations and are ongoing. These insults have literally been embodied by many Indigenous people who are disproportionately burdened with poorer health outcomes than their non-native counterparts, as measured by nearly every health and social determinant indicator (Adelson, 2005; Gracey & King, 2009; King, Smith, & Gracey, 2009; Reading & Wien, 2009). Unsurprisingly, HIV follows this trend: overall, the HIV infection rate for Indigenous people was about 3.6 times higher than among non-Indigenous people in 2008 (Public Health Agency of Canada, 2010).

Nevertheless, Indigenous communities across Canada have long resisted colonial oppression. Today, the Indigenous population in Canada is characterized by its youthfulness, with 50% under the age of 25; and by its growth, with an annual growth rate of 2% (Statistics Canada, 2008). The Indigenous population grew by 45% between 1996 and 2006, almost six times faster than the non-Indigenous population (Public Health Agency of Canada, 2010). Self-government, organizational capacity, resistance to colonization, and structures of opportunity has markedly improved for Indigenous people in Canada since 1969 (Ponting & Voyageur, 2001). Indigenous youth are now coming of age in an era of unprecedented opportunity, as their communities continue to mobilize to gain political, social, and human rights. Tired of the stigma and negative stereotypes, many Indigenous youth are keen to forge a new kind of future for their community: one that is steeped in cultural pride, respectful of Indigenous worldviews, and challenging to the dominant culture (Flicker, Larkin, et al., 2008; Larkin et al., 2007). The influx of energy, optimism, capacity, and talent from youth opens up new possibilities for renewal, healing and revitalization (Danforth, Flicker, & Monchalin, 2012; Flicker & et al, 2012).

A New HIV Era?

According to a recent UNAIDS report, globally, “Young people are leading the prevention revolution by taking definitive action to protect themselves from HIV ... [As a result], HIV prevalence among young people is falling in 16 of the 21 countries most affected by HIV” (2010, p. 3). UNAIDS attributes these shifts to policy changes that have led to the implementation of a set of comprehensive programs that put young people’s leadership at the centre of national responses and “provide rights-based sexual and reproductive health education and services” (p. 7).

Here in Canada, however, we have not experienced this positive trend. In fact, for Indigenous youth, the situation is getting worse. Indigenous youth continue to be overrepresented in HIV statistics, and are diagnosed at a younger age than non-Indigenous people (Public Health Agency of Canada, 2010). Fortunately, there is much that can be learned from the international examples. First, changing the course of the epidemic is not only theoretically possible, but there is solid evidence that it is achievable. Second, it will take a concerted effort at all levels, from the individual to the national, to accomplish this goal. And third, we need to continue to listen to, and invest in, young people and their direct leadership to make these changes. As previously noted, many Indigenous youth are primed and eager to take up the challenge.

Conventional public health approaches have not yet been successful in addressing HIV/AIDS within Indigenous communities (Flicker et al., 2013). Increasingly, the arts are being

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

used as a component of health-promotion interventions and research strategies with a variety of communities (Archibald, Scott, & Hartling, 2013; Boydell, Gladstone, Volpe, Allemang, & Stasiulis, 2012; Cole & Knowles, 2007; Fraser & al Sayah, 2011; Mitchell, 2006; Raw, Lewis, Russell, & Macnaughton, 2012; Trépanier, 2008; Walsh & Mitchell, 2004). These new methods have their own ethical and implementation challenges (Boydell et al., 2012; Gubrium, Hall, & Flicker, 2014). However, many researchers working with Indigenous communities are adapting arts-based methods to work within a decolonizing research framework. While there is no one model of decolonizing research, arts-based approaches typically offer participants an opportunity to: participate equally in the decision-making process; learn and share new skills; create counter-narratives that make visible previously hidden or silenced aspects of their identity or experience; and build on or reclaim their cultural identities or cultural practices (Adelson & Olding, 2012; Castleden & Garvin, 2008; Iseke & Moore, 2011; Wexler, Eglinton, & Gubrium, 2014; Willox, Harper, & Edge, 2013).

Drawing on the experience of others (Mikhailovich & Arabena, 2005; Rivers, 2002; Wabano Centre for Aboriginal Health, 2002, 2003), the authors of this paper felt that arts-based, youth-led approaches may be useful to assist the processes of “decolonization, re-appropriation, reclaiming and healing” (Trépanier, 2008). The research team consists of community- and university-based researchers, some of whom were youth, who came together to test this hypothesis in regards to HIV prevention. The goal was to build an archive of youth-made HIV prevention media that could be used to spark different kinds of discussions about communal health and wellbeing, and then seek feedback from youth participants about their experience in the study. This information could help guide future research initiatives.

The Project

The strengths-based approach used in this project is grounded in the use of the energies and talents of Indigenous youth as a leadership resource. Many already have the skills and capacity to take the lead in HIV prevention; others need additional culturally-safe supports (Brascoupe & Waters, 2009). By culturally safe, we are referring to approaches based on an understanding that goes “beyond the concept of cultural sensitivity to analyzing power imbalances, institutional discrimination, colonization, and relationships with colonizers, as they apply to healthcare” (NAHO, 2006).

Six communities participated in this research from regions across Canada: (a) the urban Indigenous community in Toronto, Ontario; (b) Kettle and Stony Point First Nation, and Aamjiwnaang First Nation, in southwestern Ontario; (c) Kahnawá:ke First Nation and the urban Indigenous community in Montreal, Quebec; (d) Nak’azdli First Nation in northwestern British Columbia; (e) the urban and on-reserve community around Charlottetown, Prince Edward Island; and (f) the Inuit community of Puvirnituk, Nunavik (northern Quebec). The project was guided by the Taking Action National Youth Advisory Committee, comprised of eight Indigenous youth under 30 years of age from across Canada. The purpose of this group was to provide advice on how to engage other Indigenous youth, how to talk about HIV/AIDS and sexual health in creative and interesting ways, and to help the research team plan for working with other communities. This group of youth participated in regular conference calls to provide input into the project.

The National Youth Coordinator (JD), herself a part of the research team, in collaboration with the Principal Investigator (SF), had primary responsibility for hiring, training, and

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

supporting a local youth coordinator in each community to lead Taking Action workshops in their community. Workshops were planned to allow the local youth coordinator from one community to participate in another community’s workshop before planning his or her workshop. The first workshop was led by the National Youth Coordinator with the participation of the local youth coordinator from the next community. Thereafter, all workshops were led by the local youth coordinator with the support of the National Youth Coordinator. Each local youth coordinator organized a weekend workshop customized in response to local needs-assessment findings, and recruited participants using flyers, posters, local media, and social media. Recruitment materials called on Indigenous youth “to lead the way” in HIV prevention and highlighted the specific art forms that were offered in each community. Potential participants were screened for eligibility and then asked to fill out a consent or assent form and when necessary, to get parental/guardian consent.

Local youth coordinators hired a total of 12 Indigenous youth artists across Canada to facilitate art-making activities. We also recruited two non-Indigenous youth and six local Indigenous adults to facilitate specific art activities. Workshops were a mix of technical skills building and art-making.

Youth participants were also engaged in a variety of interactive games and activities developed by the Native Youth Sexual Health Network. These activities were designed to (a) teach about HIV; (b) reaffirm and support cultural identity and pride; (c) examine the links between historical trauma, colonization, and HIV; and (d) inspire activism and change (Yee, Heaslip, Proudfoot, Smillie, & Flicker, 2010).

In some communities, for example, youth participants played *Sexual Health Bingo* as an icebreaker. Participants were instructed to find others with particular characteristics (e.g., find someone who knows where to get condoms or someone who knows the word for sex in a Native language). This game helped people get to know one another, and identify knowledge holders in the room. In other communities, youth participants played *Sexual Health Jeopardy* to assess the group’s knowledge about HIV and share information. Other activities included *Condom Relays*, watching short educational films, and engaging in a variety of theatre games to talk about HIV. Youth participants played *Connect It!* to help them learn to connect structural inequalities with individual risk. Participants were asked to write down the first words that came to mind when they heard the terms “colonization,” “youth,” and “HIV” using differently-coloured sticky notes. Then, in small groups, they worked to fit all the notes together, and finally presented their work to the larger group. This activity helped youth participants to consider key themes to focus on in their artwork. Youth participants then worked in their chosen media to create pieces of art that helped to reveal the links between structural inequalities, individual HIV risk, and Indigenous cultures.

Elders opened and closed sessions through ceremony and remained available throughout to provide support as needed. Workshops culminated in Sunday evening exhibitions where youth participants showcased their work and facilitated wider discussions with the community about HIV. Some community partners prominently displayed the visual artworks in their communities for several weeks or months following the workshop. In communities where hip-hop songs were developed by youth participants, these songs were played by local radio stations for several weeks. In addition, we filmed the process and provided short videos about it to each community. The videos and artwork are available online at (see: www.TakingAction4Youth.org). In total, more than 100 youth and 20 artists from six different communities participated in Taking Action activities. In some communities, younger children, older youth, parents, and grandparents (all of

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

whom fell outside our inclusion criteria) also participated in various activities. Eighty-five participating youth who met our inclusion criteria (i.e. between the ages of 13-29) filled out our demographic survey and returned assent and/or consent forms indicating their interest in participating in the research aspects of the project. Table 1 summarizes the number, age, and gender of participants and itemizes the types of art created in each community. The median age of participants was 16. Close to two thirds of research participants identified as female (63%). Forty-nine percent identified as First Nation, 5% as Métis, 26% as Inuit, and 11% as Mixed-Heritage or Other; 9% checked off more than one box.

Table 1.
Communities, Participants, Age, Gender and Art Forms

Community	# of Participant s	Average Age (Range)	Sex (% Female)	Arts
Toronto	8	14.1 (13–17)	87.5%	Hip Hop, Painting, Theatre
Kettle and Stony Point & Aamjiwnaang First Nations	15	15.5 (13–19)	33%	Hip Hop, Painting, Theatre
Puvirnituq	27	16.5 (13–26)	85%	Throat Singing, Inuit games, Painting, Photography
Charlottetown	10	14.5 (13–17)	50%	Carving, Film Making, Painting, Photography
Nak’azdli	9	15.5 (13-19)	56%	Video Making
Kahnawá:ke	16	19.7 (13–29)	56%	Theatre, Photography, Graffiti, Painting
TOTAL	85	16.5 (13–29)	63.4%	

Eligible youth participants were invited to take part in individual in-depth interviews with the National Youth Coordinator one to two months after the event. These interviews were timed to coincide with community-wide events organized by the local youth coordinators in which completed videos of the entire weekend process were shown. These follow-up interviews were focused on the youth participants’ reflections: of their experience, of the impact of the art-creation process, and on the art created. Interviews were intentionally open-ended, casual conversations. They were conducted in a variety of places, including homes, cafes, health centers, and “in the bush” at a culture camp. All interviews were conducted in English, were audio-recorded, and were transcribed verbatim. Seventy youth (82%) participated in follow-up

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

interviews. This a good response rate given the remoteness of some of the communities and the limited time available to complete the round of interviews. Some youth participants were not available at that time. Others declined without stating a reason and a few were lost to follow up.

Data were then inductively coded collaboratively by a team of Indigenous and allied graduate students using the DEPICT method (see: Flicker & Nixon, 2014). Despite the challenges associated with the practice of coding data in some Indigenous communities (Simonds & Christopher, 2013), our team decided that this approach would effectively protect the confidentiality of youth participants in small communities. Transcripts that were stripped of unique identifiers were reviewed. Key themes were identified collaboratively, then team members used NVivo software to apply and manage codes. Coded data were analyzed collaboratively at a retreat that all co-investigators and Youth Coordinators were invited to attend. Everyone invited was able to attend at least part of the retreat.

Results

In this section, findings related to how youth participants viewed both the process and the products of their engagement with the arts to create HIV prevention communications are presented. This is followed by a discussion of the tensions that arise when focusing on the process of participating in Taking Action versus the products that youth participants created in the Taking Action workshops.

Process of Art-Making

“Because it’s fun, and it teaches you stuff, and that’s what kids like doing, like, to get active, and art kind of stuff.”

Youth participants were very excited about the potential for using art to think about HIV. Many talked about how “art is part of our culture ... so it is a great way to get ... out there!” Nearly everyone described the process as not just enjoyable, but a lot of fun: “Like, that was fun... the whole art thing - I like that, like getting into it with art. That was fun. Yup, I liked it.”

Other youth participants contrasted the experience with other health education efforts they had encountered. One remarked that “it was not boring”; another, that it was preferable to approaches based on “sitting there and listening, because I have trouble with that sometimes.” Youth participants regarded public health activities as typically boring, based on their experience with presentations they had previously attended:

I thought I was just going to go and sit there and listen to people talk about it for the whole time, but we did art, and it was fun, and it made it a whole bunch easier [to talk about HIV].

Art-making was described as enjoyable because of its participatory nature: “Rather than being told what to do... We don’t just worry about it, we get up and do it.” Art-making was seen as an opportunity to learn about culture. Youth participants talked about how learning traditional art forms, such as carving, throat singing, drumming, and painting, was an effective way to focus on the issues while learning about, and in some cases, reclaiming, parts of their heritage. One youth participant noted that the key message of her work was reflective of the process she used to create it: “Stay in touch with your elders; stay in touch with [your] culture and know your education and be safe.”

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

Many youth participants credited the enjoyable process with enhancing their recall of HIV prevention information: “You talk so much you don’t really remember, but if you do art you are going to remember it all.” For other youth participants, the process of making art was healing and provided an important emotional outlet:

[I]t is hard for me knowing that my dad is [HIV+] and I don’t really know how to cope with the fact that he is going to go - and even just getting the family mentally prepared for the loss - because I know it is going to be hard when my dad hits the hospital stage.

Several youth participants talked about the importance of offering a range of different opportunities for participation in art-making:

Yeah, some people might not like any certain kind of art, like music, and you know, someone may like music a lot but don’t like painting. ... You can get something for everybody. And I know a lot of kids like art and stuff because it is fun.

Even when youth participants collaborated on a single end-product, such as a video or a play, they described how some of them preferred to focus on the message, through directing or writing, while others gravitated to presentational areas like acting, music, and camera work:

OK, theatre, it was just like acting. But we put in so much thought; it was so much different things; singing, acting, modeling. So actually you got to do more in the theatre thing...

For others, a highlight of working on their project was the opportunity to develop new technical skills. For instance, several youth participants talked about how skills such as film-making, which they developed at the workshop, might be applicable to other contexts or even to job opportunities.

Product of Art-Making

“Cause lots of people look at art, especially Native people, because they have, like, really unique art styles.”

Over the course of six workshops, youth participants created dozens of finished pieces using a variety of media formats. Most works were the collaborative effort of small groups of youth participants (see Figures 1, 2, and 3 for some examples). With the assistance of trained artistic facilitators - the majority of whom were youths themselves or were local community members - even youth participants with limited experience in their chosen medium created arresting pieces that were both informative and aesthetically pleasing.

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

Figure 1. Mural Created by Youth Participants from Kettle and Stony Point First Nation & Aamjiwnaang First Nation in South-Western Ontario.

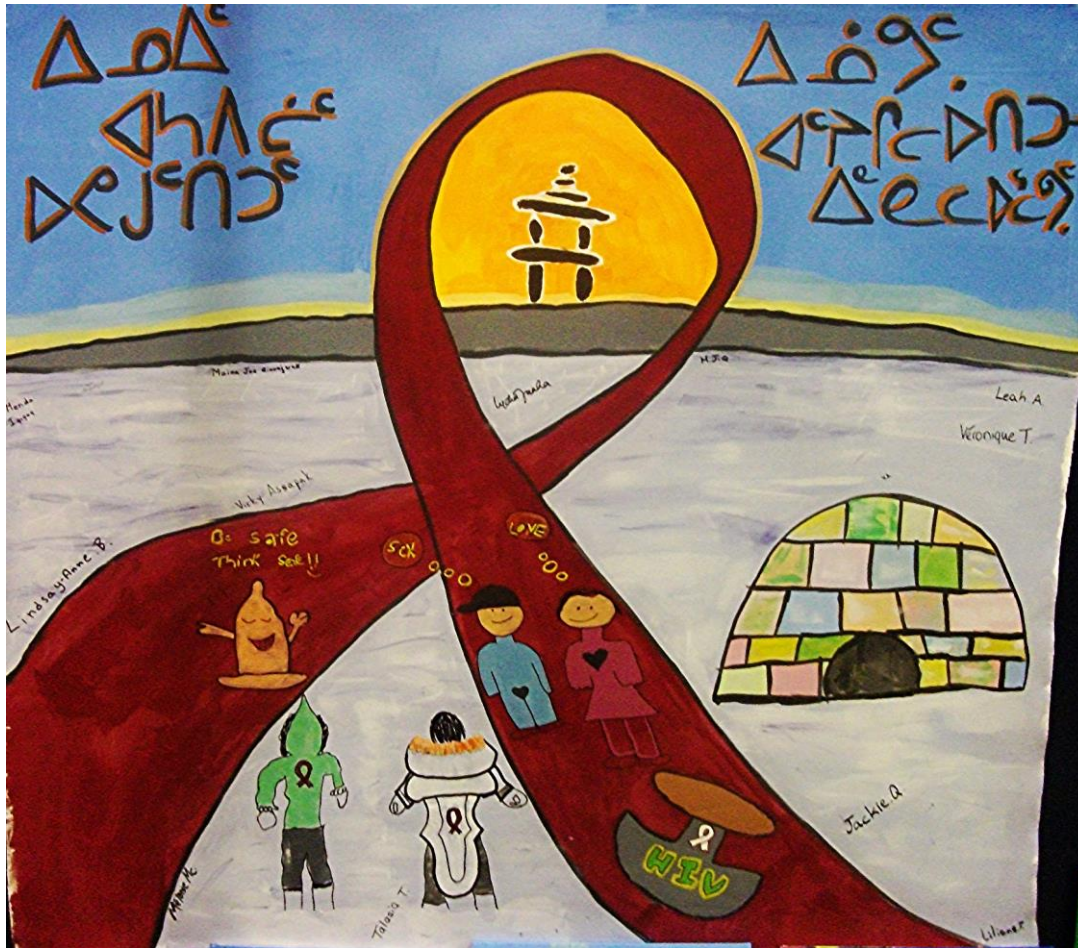


Figure 2. Graffiti Installation Created by Youth Participants from Kahnawá:ke First Nation and Urban Indigenous Youth Participants in Montreal, Quebec.



“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

Figure 3. Mural Created by Inuit Youth Participants of Puvirnituk, Nunavik (Northern Quebec).



Many youth participants discussed the power and potential of their finished products to promote dialogue and transmit important messages with such statements such as: “It could be helpful because you are rapping and you could help people,” and,

Like, you can paint ... a real good picture, and it says, like, a whole bunch of stuff about HIV, and hang it up somewhere where people might read it, and they will know, and they will want to tell more people.

Regardless of the art form, the pieces created were thought to be good media for conveying messages, as well as for standing on their own as artistic works:

Art is always good because people do respond better to visual things, and I know a lot of people don't like to read ... and when you see an image that just strikes you ... it just makes you think about something.

Youth participants talked about being very proud of their final products: “[It] makes me feel good, like when my family tells me they are proud of me; makes me feel pretty cool ...” The

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

works of art were not only showcased locally in their culmination exhibits, but continued to be exhibited. Songs were played on the radio, murals were hung in prominent places, videos were presented at conferences and symposia across the country, and one of the plays was performed at a national conference.

Feedback from audiences in all of these venues was perceived by the youth participants to be overwhelmingly positive. Youth participants felt satisfaction that their work was seen as important and was making a difference. They also felt that this positive attention was good for the community: “Yeah, because everyone is, like, really proud and happy for us and brought more people together to see it, and yeah.”

Furthermore, many remarked on the emotional impact the art engendered: “I think it was, a lot of people were genuinely touched by it; I saw some people crying; I got flowers from two people I did not know before [after they saw it].”

As such, many youth participants wanted to see the work much more widely promoted. When asked what should happen with his film, a participant offered, “[We should play our movie in] every reservation in Canada and North America if you can... Basically worldwide or nationwide... Because we are natives and we stand strong to our pride.”

Others suggested that the products might be very useful in initiating health education conversations with youth in other contexts. For instance:

It would be a good starter for those who don’t know much about it. Like in our video, we gave more information and stuff about it ... but I say that video would be a good way to start talking about it.

Using the pieces as a springboard for discussion was suggested as a way to help people open up when talking about “hard things.” Referring to a graffiti installation that featured a smiling cartoon condom, one youth participant offered:

Well, I think that is the most important starting point to talk about safe sex, so it is a condom, and he is smiling, and he is like, “Yay I am a condom,” so sex, no HIV, well, that’s the point of HIV prevention, so I think that was my favourite ... it is really cool too.

Youth participants were also able to glean important messages from the art pieces. One youth participant talked about how a theatre performance helped her challenge HIV-related stigma: “[The art taught me] that if there is one person in particular that has HIV/AIDs we should all help them, not push them aside and make them be the outlier, so, yeah.”

In addition to spreading the word about HIV, youth participants from several communities were concerned with challenging stereotypes about Indigenous youth:

Yeah, um, to me that [video] just shows that we are with the modern world; we are not back where we were two or three-hundred years ago. Not just the simplistic patterns; you cannot just call us simplistic folk, like farmers, hunters, gatherers; we are living in this world too.

Youth participants felt that their products were ambassadors for the message that contemporary Indigenous art is alive and thriving. Some were very interested in preserving and maintaining traditional art forms, including this youth participant who stated, “I like traditional

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

Aboriginal art; I have always found it especially beautiful and interesting.” Others chose to express themselves with newer media, such as hip hop or music or graffiti, which they felt resonated with other parts of their identity. In describing his graffiti installation, which used spray paint to re-envision a medicine wheel, one young man offered, “So it’s, like, different to see, and it is, like, informative and this one is, like, showing culture [in a new way].”

This bridging and challenging of culture interested a lot of youth participants. Another commented: “I think youth definitely pay attention to art and it is something that can bridge the gap [between traditional and modern ways].”

The art products produced by youth participants, then, were seen as effective tools for promoting dialogue and to transmitting messages about difficult subjects, such as safer sex and HIV prevention. They provided a means for youth participants to showcase their artistic skills to the broader community and to feel good about their contributions. Finally, they were seen as an effective way to challenge static notions of Indigenous culture, and to champion an image of Indigenous culture that is dynamic, creative, relevant, and historically grounded.

Process vs. product.

In many ways the process and products of art-making are inextricably linked. Those who make art are often most influenced by the products of others, which in turn fuels a desire to further create:

Because everyone is involved with art and music, everyone loves any kind of art, so I really think people like doing it, like making it and people like watching it and getting involved. And when, like, an art show - I really think ... getting the message across through art is good because everyone loves art, ... and everyone is going to see it somehow or watch it somehow, so I think it is good; it is a good way to get the message across.

Furthermore, when youth participants shared their work, they were often reminded of the process. As such, the pieces became powerful reminders of the knowledge and ideas about HIV prevention that they were created to express:

Yeah, like every time [we hear] that rap song. We always talk about it and mention stuff about it; or if we see the art around. Or even just hear the word HIV and know of the time we had; what we learned about it.

Another youth participant stated:

Because it is in the movie ... when I learned it through a workshop it got stuck in my mind; if I see something and learn it in a fun way then I get interest for that stuff, and then I can remember.

Finally, another youth participant shared this:

Like the stop motion on my Facebook or whatever and people were like. “That is really cool. What did you do it for?” And I explained, like, everything, and they were like, “That is so cool; I would have joined if I knew.” I was like, “That is so cool because we needed more people there, like, the more the merrier!” So yeah, I am sure if there was another Taking Action, more people would come.

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

The relationship between process and product, however, was not so comfortable for all youth participants. For instance, in some cases the artist-facilitators assisted with a heavier hand to ensure that the final pieces were sufficiently polished for public consumption. Such attention often resulted in products that were more professional. Some youth participants were very excited by their participation in these professional-looking products. Others, however, expressed frustration at their inability to produce a comparable level of work, with some commenting that they did not feel the same degree of ownership over the product after revisions were made.

Limitations

The Taking Action sample was self-selected: only those interested in art or HIV would sign up to participate. Care must therefore be taken when interpreting the results. Arts-based interventions may not work well for youth in all contexts, and not all youth are equally eager to participate in art-making. Nevertheless, a diverse cross-section of young people from various cultures, regions, and walks of life participated in this project, including some whose voices would rarely be heard otherwise.

Process and Product as Decolonization

Findings from this study support the notion that arts-based approaches to the development of HIV prevention knowledge and Indigenous youth leadership are working to involve a diverse cross-section of youth in a critical dialogue about health. Arts-based approaches represent one way to assist with decolonizing the research process, moving forward the agenda of ownership, control, access, and possession (OCAP) (Barlow et al., 2005; Schnarch, 2004). While this project focused on HIV, one could easily imagine how similar techniques could be used to foster discussion on a range of meaningful health and social issues.

Equalizing power relations.

Decolonizing arts-based initiatives have as their goal the empowerment and affirmation of the participant. Arts-based methodologies aim to create a more equal relationship between researchers and participants, in which the contents of the research (product) and its interpretation (process) belong to the participant and his or her community (Huss & Cwikel, 2005). White (2003) has described arts-based processes as “participatory communication” involving dialogue between and among team members rather than hierarchical relationships. In this view, art is not only a vehicle for conveying a message (product), but also a transformative medium for engaging with power structures, cultural values, and identity development (process). In the case of Taking Action, both the output and its interpretation are culturally sensitive, producing research data in artistic forms that value the contexts in which the art is created and in which young people live.

Arts-based designs reflect an understanding of research whereby both the process and the product of the research are extensions of the participant. Artistic productions reflect the multiplicity, contradiction, and self-representation that are common to researcher, participant, and observer alike; however, the pieces of art belong to the youth participants who create, define, and understand the works on their own terms. Hip-hop performances, drama, graffiti, and photography have the ability to reach across what Anzaldúa (1994) terms the borderlands between academic research and artistic and local communities. Through the arts-based research process, theory is produced within and between the artistic productions that Indigenous youth create.

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

Centering Youth Voices and Complex Identities

Arts-based research does not seek to find universal truths or uncomplicated solutions. On the contrary, the very strength of using arts inquiry is that it reveals multiplicities, strengthens intersectional identities, creates accessibility, and tells the stories of those who have often been unheard or whose stories have been erased. The power of art is in its evocation of meaning, and in its ability to heal, to provoke, and to stimulate change (Bochner & Ellis, 2003). Through the various media explored by youth participants in Taking Action, young people had the opportunity to blend the traditional and the contemporary, creating artistic outputs that made room for hybridized and complex expressions of identity. Hiring local, Indigenous artists and mentors was also critical to reclaiming artistic practice, and to connecting young people to role models who helped build technical and artistic skills as well as cultural knowledge and pride. Providing youth with access to Indigenous mentors, teachers and artists is a crucial component to empowering youth in their HIV prevention messages. As Yee (2009) underscores: “Examining cultural competency and sex education means using what we already have in our culture to empower our youth to lead healthy, strong lives, while intersecting it with our present day realities” (p.4).

Decolonizing the research process means creating spaces that are open to diversity and to history. Rather than passively engaging with text, art requires the audience to become actively involved with the artist and her creation. In this way, youth are able to self-represent, eschewing stereotypes or marginalizing discourses that attempt to oppress them, and replacing those representations with ones of strength, empowerment and cultural pride.

The art of making meaning.

Artistic works provide space for meaning-making, for the negotiation of identity, and for the expression of counter-hegemonic political realities. Seen in this light, arts-based projects have the potential not just to reflect social conditions, but to change them (Malandra, 2007). These works of art cannot be properly understood apart from their contexts. They are the product of time and place, reflecting the complexity of relationships between people, places, and social structures. There is always the potential that many more messages are created than originally intended. However, in fusing participant empowerment with resistance and social change, arts-based methods have a clear advantage for those pursuing a health equity decolonization agenda. In many ways, the process of decolonization becomes prevention in and of itself.

Conclusion

Youth participants involved in the Taking Action project identified that both the process and product of arts-based methods were important. In terms of the process, they enumerated several benefits, including that it is fun, participatory and empowering; that it builds self-esteem; and that it promotes the transfer of cultural practices and skills. In addition, the process enhances recall and helps to facilitate dialogue about difficult topics. The created products bring their own benefits of instilling pride, communicating information, raising awareness, conveying emotion, and drawing youth into learning about HIV. These are tangible, long lasting, and can bridge, change, and challenge traditional and conventional norms

As described above, there are benefits to be reaped from both the process and products of arts-based intervention efforts (Mitchell, 2011). Youth participants found value in both. Process focuses on doing and creating, and is always in a state of flux. Finished products are in many ways static, but they can push us to think differently and find pride in our work. Another way to

“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

think about this is that the process becomes a product in and of itself, and vice versa. For instance, creating a film (process) leads to the final video (product), which then gets used as a springboard for discussion and activism in another community (process), and the cycle begins anew. Teams will need to carefully think through the purpose of their projects and allocate resources accordingly. Time, expertise, financial and technical resources, and community desires and readiness will all be important to consider (Flicker, Maley, et al., 2008).

Arts-based research is meant to be transformative. It is meant to see things both as they are and as participants would like them to be—they are the producers of knowledge (Mullen, 2003). Participants develop skills while maintaining creative control. Often, as with Taking Action, they choose their own artistic media and share their own knowledge and interpretations. In so doing, participants are able to challenge stereotypes and to self-represent in a constructive manner. Abstract concepts can be applied to specific situations using personal, cultural, and community experiences (Mason, 2002). This approach is particularly relevant for Indigenous youth, who are often labelled negatively and who face a number of obstacles due to racism and a history of cultural erasure. Traditional research techniques have often proposed explanations of youth behaviour that seem distant from the experiences of young people (Bennet, 2003). When given creative control over the research process and its artistic output, young people create works that are representative of the social and political contexts in which they live. Arts-based research provides opportunities to carve out spaces of ownership, pride, and self-determination—opportunities to showcase, in the words of one participant, that “we are living in this world too.”

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“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

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“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

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“Because we have really unique art” • Sarah Flicker, Jessica Yee Danforth, Ciann Wilson, Vanessa Oliver, June Larkin, Jean-Paul Restoule, Claudia Mitchell, Erin Konsmo, Randy Jackson, Tracey Prentice

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