



CHAPTER 5

Indigenous Nurse Perspectives: Ethical Realities

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and Christina Chakanyuka**

“We are told that decolonization will not occur through discourse alone. The ethical path forward is action. Take what you have heard and build towards change.”

[*Editors’ note:* This chapter is presented by five Indigenous authors using a style that reflects their positionality and expertise in regard to Indigenous perspectives about nursing ethics. The chapter begins with rich narratives written by each author to contextualize their discussions, which follow in the Circle video and its accompanying transcript.]

Bios/Positionality

Leanne Poitras Kelly

Taanshi! Leanne Poitras Kelly *dishnihkaashoon* and I am the youngest of seven children, born in Balcarres, Saskatchewan to Rose Amyotte and Alexander Poitras. Both of my parents are Métis-Cree from Saskatchewan. My mother was born in the area known as Katepwa, where I continue to return to feel whole, and my dad was born in the area known as Tullymet, his family having migrated from the Métis community of Turtle Mountain, North Dakota. Both were from Road Allowance¹ families and like many Métis made a living travelling for work and finding community among other Métis families. My maternal line of ancestor names include Racette, Cardinal, and Bellegarde. The women of my Poitras line had the family names of Jaunotte, Ross, and Laverdure. I speak the names of my ancestral line as it reclaims and positions Métis as present in this country for generations. It creates visibility in the face of invisibility. I have been a nurse for over thirty years and worked predominantly in First Nations communities. I am currently a PhD candidate and instructor at the University of Victoria School of Nursing.

Mona Lisa Bourque Bearskin

tân'is Mona Lisa Bourque Bearskin *nitisiyihkâson amiskosâkahikan nêhiyaw peyakôskân, ostêsimâwoyasiwêwin nikotwâsik ohci niya kayahtê*. Born into the Bearskin family from Beaver Lake Cree Nation, in Treaty 6 Territory, I identify with my matrilineal side, *nôhkom* Marianne Bearskin *nikawiy* Elma Bourque Bearskin, as a means to recognize the long-standing rematriational strength, resistance, and tenacity I originate from. In recognizing the long-standing line of women I come from, I acknowledge my father, a settler from the Langevin family, with deep roots in historical violence played out in the residential school policy. I have never known him, but through stories I learned of the deep compassion he had for those who were not treated with dignity. His own social suffering was rooted in deep love for *nikawiy*, where my own critical

insights and love of nursing was born, and thus shaped who I am, where I come from and what I stand for today. As a mother my children (two sets of twins) are at the heart of my existence and expression of love. As an Associate Professor at Thompson Rivers University, and an inaugural Canadian Institute of Health Research-Institute of Indigenous Peoples Health (CIHR-IIPH) Chair holder in Indigenous Health Research for Nursing in British Columbia, I am leading community knowledge as a generative process in advancing Indigenous health nursing research.

Lisa Perley-Dutcher

Wolastoqi ehpit nil/ I am a Wolastoqiyik/Maliseet woman, and the daughter of Carol Sappier and Raymond Perley, both from Neqotkuk/Tobique First Nation. In my youth, I was rooted in social activism, as several women in my family and community led the way in helping to change the *Indian Act's* removal of status from women who married out. My partner Stephen, our four sons, and our four granddaughters keep me grounded in love. I worked as a registered nurse for 30 years in a variety of capacities and completed my master's degree in nursing from the University of New Brunswick (UNB) in 2012. A major focus in my career has been contributing to positive health outcomes for Indigenous Peoples and promoting cultural competency/safety practices of health care providers. I have been a coordinator of the Home and Community Care Program, the first UNB Director of the Aboriginal Nursing Initiative, Indigenous Services Canada Atlantic Director of Mental Wellness, and president of the Indigenous Nurses Association of Canada. I am currently leading Wolastoqey language revitalization by establishing the first Wolastoqey immersion land-based education program in Wolastoqey territory.

Bernice Downey

Aanii! Boozhoo! I am an Anishinaabe-kwe (Indigenous woman) of mixed Ojibway-Saulteaux and Celtic ancestry, with kinship ties to Lake St. Martin and Dauphin River First Nations of Treaty 2 in Manitoba. I am a mother and grandmother of two beautiful grandchildren. I am currently a medical anthropologist and former

registered nurse and have held senior leadership positions with the former Aboriginal Nurses Association of Canada and the National Aboriginal Health Organization. I am currently appointed to the Department of Psychiatry and Neuro-Behavioural Sciences and the School of Nursing in the Faculty of Health Science at McMaster University. I am also the inaugural Associate Dean, Indigenous Health for the Faculty. My research interests include health literacy, Indigenous Traditional Knowledge and health/research/education system reform for Indigenous populations. I currently hold a Heart & Stroke Foundation — Canadian Institutes of Health Research — Early Career Chair in Indigenous Women’s Heart and Brain Health. I am committed to addressing anti-Indigenous racism and the promotion of Indigenous self-determining approaches in health equity and system reform. I presently reside on the traditional territory of the Chippewa, Odawa, Potawatomi and Delaware, and Oneida Nations.

Christina Chakanyuka

Mahsi. As a Métis nurse, educator, and (re)searcher, I honour that the source of my situatedness and knowledge that I hold stems from who I am as a person, where I come from, and to whom I am connected. Growing up on Dené, Cree, and Métis homelands in rural-remote Fort Smith, Northwest Territories, I had the privilege of connecting with the land, water, and my Indigenous roots in ways that shaped my sense of belonging as a Métis woman from a young age. My matrilineal roots are with the Villebrun and Gladue families of Thebacha and Athabasca. I hold strong family ties to my mother’s British, Dené, and Cree-Métis relations, as well as my father’s Scottish-Canadian settler relations. I care deeply about affirming the rights of Indigenous Peoples to self-determination in healing and wellness. I am passionate about co-creating culturally secure space, place, and base for Indigenous nurse wellness in community, and I am committed to working collaboratively with others in Indigenist research-activism guided by the core tenants of anti-racism and love. I am currently teaching and completing my PhD in nursing at the University of Victoria on unceded Coast Salish homelands.

When approached to contribute to this book, several Indigenous nurse scholars carefully considered ideas and concepts that would do justice to the topic. Albeit, one chapter encapsulating all that is involved within an Indigenous ethical world view is an impossibility. We spoke about crucial topics of colonization, racism, land acknowledgements, cultural safety, performative policy (meaning policy that is created for the optics without resources or actionable accountability), research ethics, the value and place of storytelling, deficit-based parameters that pathologize Indigenous Peoples' health, neocolonialism, reconciliation, world views, White dominance within nursing, and nursing history. How are we able to cover all of these critically important pieces in one chapter? Couple this complexity with the fact that there is diversity and fluidity within Indigenous Knowledge, which shifts in response to living and being.

We are at a point where space for an Indigenous voice is suddenly very visible, valuable, and in demand. Very rarely has academia, and specifically nursing, made room for Indigenous experience, knowledge, and inquiry within our profession, despite years of advocacy at the highest level of government. Increasingly, this is both a blessing and a challenge, as there are relatively few Indigenous nurse scholars being called upon to fill this role. Those with a cynical view might suggest that this invitation to Indigenous nurse scholars is a sign of a “woke” academy that seeks to both check the box of Indigenous authorial space and to add to the credibility of authors, editors, and universities. Alternatively, those of us who take a reasoned view sigh in acquiescence that “at last” we are seen and we must answer the call, as is our responsibility. We collectively hold in high esteem all those relationships with our families and communities that have supported us in the positions we hold. Thus, by fulfilling this obligation, we are reminded to add our voice in authentic and self-determining ways.

We make the decision to contribute to this text with thoughtful introspection regarding our own abilities and legitimacy to speak. As we know, in academia, once something is written, it is in the world for re-use, re-interpretation, and misappropriation beyond our control. We are unable to scrutinize future use of our perspectives, but as members of our Indigenous community of nurse

scholars, we rely on the knowledge that our Indigenous peers and communities will authenticate and critique our presentation and representation of Indigenous voices in ways far more reaching than any academic peer review can provide.

Using our nursing voices, we must develop the content in a way that does justice to Indigenous Knowledge, without perpetuating pan-Indigenous stereotypes, all while upholding the highest ethical regard for the ways in which our knowledge and world view is set to paper. We must also be mindful of ancestral voices that have informed our own diverse expression of ethics, our originality, and how we interpret and infuse our perspective on ethics. Drawing on these distinct views, we carry intergenerational teachings and values through orality and Oral Knowledge-sharing traditions. Our Knowledge Holders, our life experience, our communal understanding and our reflective inquiry guide us as we consider what we can offer advanced practice nurses in the pursuit of upholding Indigenous ethical protocols.

In our contribution to this volume, we use circle pedagogy, in which we explore together what nursing ethics means from our own distinction-based First Nations and Métis nurse perspectives. With this distinction-based approach, we acknowledge the rights and lived experience of First Nation, Inuit, and Métis peoples as unique. This approach aligns with the *United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP)* (United Nations, 2007) in recognizing and upholding the ancestral teachings of traditional laws and languages while living in relationship to the land. With this approach, we are asserting both distinction and inclusivity, as our experience intersects with Indigenous social determinants of health regardless of constitutional definition or geographic location (Government of Canada, 2021).

Our methodology reflects the ways in which our collective voices are heard, while being accountable to our own teachings and teachers. As an ethical foundation, we centre strength-based views that will help us to formulate cultural safety, cultural humility, and cultural security approaches aimed at taking immediate action to eliminate Indigenous-specific racism.

Esteemed Indigenous scholar Cora Weber-Pillwax provides us with an overarching theme to assist us in focusing on *ethical action*:

Decolonisation as of this moment has no endpoint; years of social interaction between Indigenous people and the multiple and varied groups of people that form the segments of Canadian population society has shown clearly that decolonisation will not be attained through discussion, discourse, or critical theory. Decolonisation is not merely a concept, it evokes and *stimulates earth- and people-shattering consequences* on a daily basis. (Weber-Pillwax, 2021, p. 3, emphasis original)

This quotation reminds us of the quality of daily life for Indigenous Peoples of this land, as well as the impact of continued oppressive social, economic, and health care policies. As nurse leaders, we have the potential to create change. It is our ethical obligation to do so.

Orality as a method/process has served our communities in the passage of knowledge for millennia. Those of us who work in academic spaces have learned to respond to the demands of the written word. We also long for the ability to create sustainable and spiritual-based relationships by listening to our mentors and learning to speak our truth. This opportunity to engage in reflexive conversations on Indigenous nursing ethics has brought us together to affirm our voices and collectively contribute our individual thoughts in supportive and relational ways.

We are taught by our Knowledge Holders that orality, rooted in language, is imperative for learning in the present, taking what is given, and knowing that what we internalize now is what was meant for us today. There is simplicity in letting go of the need to document every word in text as a means of eliminating the collective spirit and the relational experience, which leads to dominance of the written word (Weber-Pillwax, 2001). We are taught that coming together in circle, speaking and sharing takes on a life of its own and reflects a journey that is unique to each person in relation to their own family and community. Our teachers tell us to “put down our tobacco with our intention for the circle process” (Knowledge Holder teachings, personal conversation, B. Downey, 2022), and in doing this we create the ethical space for our deliberations and exploration of our respective realities. Indigenous scholar Cora Weber-Pillwax (2021) invites readers (and we add listeners) to

“enter into the following narratives as a means of decolonizing engagement rather than as a way of critically following a line of argument. In accepting to enter into the world of the narrative and walking the trail as it has been laid out, readers [listeners] become a part of the decolonising experience” (p. 3). In this way, the learning is active. The listener will take in information based on their current positionality and their aspiration to endeavor further.

While the speakers in the video portion of this chapter approach this subject from our distinct intergenerational perspectives and experience, there are common foundational beliefs upon which we all agree. First and foremost, we do not assert ourselves as ethics experts. We acknowledge that we cannot and do not know everything. We are lifelong learners who have experienced various iterations of genocidal policies that contribute to oppressive and marginalizing actions that have impacted our Indigenous existence in Canada, affecting our access to our ancestral languages, rights, and teachings. We speak today building on the genealogy of our knowing, drawing on those many mentors who have lifted and shaped our ability to hear, grow, and understand the obligations of Indigenous ethical relationality. We celebrate this. We come to this conversation knowing that we are all in fluid processes of reclaiming and renewing our ancestral knowledge. Our voices as we speak our languages may not flow as musically as our ancestors’ did, but the act of speaking them reclaims our relationship to that ancestral voice and is a means of decolonizing our own minds and hearts.

The source of Indigenous nursing ethics, and *all* Indigenous ethics, is *relationship*. It serves to bind and create pathways for knowledge to be transmitted, for people to be seen by each other, and for each of us to work to understand who we are *in relation* to one another. Willie Ermine (Ermine et al., 2004) speaks of the concept of creating an ethical space, which supports the bridging of distance between Indigenous and non-Indigenous cultural divides in a way that honours unique community experience and knowledges.

The idea of two spheres of knowledge, two cultures, each distinct from one another in multiple forms, needs to be envisioned since the distance also inspires an abstract, nebulous space of possibility. The in-between space, relative

to cultures, is created by the recognition of the separate realities of histories, knowledge traditions, values, interests, and social, economic, and political imperatives.

As a process, the fundamental requirements of the ethical space include an affirmation of its existence. The ethical space cannot exist without this affirmation. The affirmation of the space indicates that there is an acceptance of a cultural divide and a direct statement of cultural jurisdictions at play. The ethical space also requires dialogue about intentions, values, and assumptions of the entities towards the research process. The dialogue leads to an agreement to interact across the cultural divide. (pp. 20–21)

This speaks to the work that must be done to create visibility of one's own positionality and one's relationship to Indigenous communities by acknowledging what one may know and not know. Work must be done by settler/newcomers who wish to engage in ethical ways with Indigenous communities.

The speakers in the video portion of this chapter each come to this core tenet of relationship with perspectives that reflect our current areas of contemplation, inquiry, and positionality. The historic and contemporary legislated policies in this country have indelibly affected the relationship between settler Canadians, newcomer Canadians, and Indigenous Peoples. In our respective lanes of work, life, and family connection, we speak to Indigenous ethics with humility, knowing that our words represent what we want to say at this moment in time.

Leanne Poitras Kelly is motivated by the experience of teaching undergraduate nurses and engaging with the public on identifying their invisible relationship with Indigenous Peoples. Naming and claiming one's own relationship is essential to move forward in an ethical way. There has always been a relationship among peoples of the land. Living in Canada means that we all live under the legislation and agreements made by past and present governments. Land allocations, geographical renaming, and access to resources shape the way we understand the world we inhabit. Understanding this means we move forward with insight and knowledge as to our own role in supporting or disrupting oppressive systems.

Bernice Downey builds on relationship work by articulating the critical importance of creating “ethical space” (Ermine et al., 2004) and recognizing “epistemic injustice”² which must be addressed. Drawing attention to the *United Nations Declaration on the Rights of Indigenous Peoples* (United Nations, 2007), and the Truth and Reconciliation Commission’s (TRC) multiple reports (TRC, n.d.-a), (TRC, n.d.-b) and calls to action (TRC, 2015) points the way for the learner to engage in structured and sanctioned processes that seek to undo the oppressive injustices of the past.

Lisa Perley-Dutcher asserts her position as a language warrior when she speaks about the interconnection and essential relationship between language, land, and identity. Her own language renewal journey illustrates the active process of being Indigenous and the foundations of healing. The interruption by colonization has shifted focus from collectivism to individualism, which is proving problematic as our societies recognize that strength lies in supportive relationships that go beyond professional interactions.

Mona Lisa Bourque Bearskin lifts up the teachings of love and belonging, which are embedded in the languages of the Cree People and the lands from which they originate. Recognizing that the spirit of being is in constant relation with land, water, and air helps us enact the ethical responsibilities that we all hold to each other. This is based on Kétéskwēw’s (Madeleine Dion Stout) original instructions described in the following four key terms: *tânisi* ᑕᑎᑦ [hello how is your being], *tawâw* ᑕᑎᑦᑎᑦ [there is room for everyone], *tapwew* ᑕᑎᑦᑎᑦ [speaking our truth] and *tipi-* ᑎᑎ [equal opportunities and equal outcomes] (Dion Stout, 2012; M. L. Bourque Bearskin, personal communication, 2010). For nurses who strive for *nahi* [fairness and justice], these teachings illustrate pillars of ethical actions that will form the basis for moving forward in a relationship of wellness that lies within our rights, language, and identity.

As you watch and listen to the video accompanying this chapter, reflect on the diverse ways of managing and respecting knowledge within oral cultures. Think about the use of language and relationship with your own knowledge holders, and your own historical and contemporary relationship with Indigenous Peoples. This reflection is a teaching. Indigenous Knowledges are created by the personal and practical experiences of our lives; they are created by

humour, humility, tolerance, observation, listening, speaking, praying, and sometimes by just sitting quietly. Knowledge comes to us in many ways, and the focus on literacy and the written text has the potential to rob us of this holistic perspective of our culture and our ethics. Speaking and listening is an active process. We are told that decolonization will not occur through discourse alone. The ethical path forward is action. Take what you have heard and build towards change.

Video Circle Format

Our decision to use a video circle format to add content to this text was made intentionally and thoughtfully, and was fully supported by the editors. Asserting our voices as Indigenous nurse/scholars involves asserting our own world views as valid and contributory to the canon of accepted academic resources. Each of us brings along the teachings and support that we have received through our lifetime of learning. This process of personal and professional narrative through orality and relationship demonstrates our trust in each other and the deep respect we have in sitting together to share what we have learned. We consciously enter into this circle to assert, as stated by Weber-Pillwax (2021), “a more general acceptance of theoretical or conceptual frames that underpin complexities that lie embedded deeply within Indigenous epistemologies and ontologies” (p. 6). The notion of orality as knowledge transmission is confirmed in the lived experience of Indigenous Peoples for generations. Shared narratives and stories of our lives and lessons is the conduit for all aspects of knowledge generation, such as acquisition, validation, sustainability, and protection (Weber-Pillwax, 2021). The use of circle in this circumstance models the understanding of knowing when it is a time to listen and when it is a time to speak. The video conversation accompanying this chapter consists of three “rounds,” in which each participant responds in turn to the questions posed below.

Round One: Introduction and Personal Positionality

Stating one's positionality involves developing a sense of who we are and what we each represent within an interaction. It is a layered declaration that demonstrates one's commitment to disrupt tacit beliefs and shows insight into one's own involvement in oppressive systems. Our statements of positionality provide the listener/reader with insight into each of our backgrounds, our communities of origin, our pathways to discovery, and our location within settler society. It is our hope that by role-modelling active transparency, we encourage others to do the same.

Round Two: "What Does Indigenous Ethics Mean to Me?"

Each of us comes from different arenas of nursing practice and carries the life experience of being an Indigenous nurse/scholar within the social constructs of dominant society, while asserting our right to Indigenous Knowledge, experience, and legitimacy. Our conversations leading to the video recording accompanying this chapter have positioned us each to reflect on what we have come to know and what we carry with us as guideposts. In this video recording, we highlight a small portion of the very real journey we have all undertaken to live our ethical world views.

Round Three: A Final Round of Take-Home Thoughts

Our closing round provides one last opportunity to briefly summarize, for the reader/listener, what they need to know about Indigenous relational ethics. This round forms the basis for future engagement and action by advanced practice nurses and nurse leaders.

Additional Resources for Readers

This chapter includes extra features not found in any other chapters of this textbook. Below, you will find a Reference section containing the works cited above, supplemental resources for learning more about Indigenous issues and reconciliation, and links to the profiles

of the video participants, as well as links to the participants' research and language work.

A major part of this chapter is the Circle video, with the three rounds of discussion as described above. Readers can view the video here: Kelly, L., Bourque Bearskin, M. L., Downey, B., Perley-Dutcher, L., & Chakanyuka, C. (2023). *Circle video*. [Video]. In R. Starzomski, J. L. Storch, & P. Rodney (Eds.), *Toward a moral horizon: Nursing ethics for leadership and practice* (3rd. ed.). University of Victoria Libraries. <https://hdl.handle.net/1828/14970>. A transcript of the video is included with this chapter.

Endnotes

- 1 According to an article in *The Canadian Encyclopedia* (Logan, 2021), “The term *road allowance* originates from the designated space that is measured between a paved or unpaved road and the boundary of where a section of private, municipal, provincial, railway or Crown land is marked.” From the late 1800s to the mid- to late 1900s, Métis people often formed communities on these lands because they were dispossessed or relocated from their homelands.
- 2 “Epistemic injustice refers to those forms of unfair treatment that relate to issues of knowledge, understanding, and participation in communicative practices. These issues include a wide range of topics concerning wrongful treatment and unjust structures in meaning-making and knowledge producing practices, such as the following: exclusion and silencing; invisibility and inaudibility (or distorted presence or representation); having diminished status or standing in communicative practices; unfair differentials in authority and/or epistemic agency; being unfairly distrusted; receiving no or minimal uptake; being coopted or instrumentalized; being marginalized as a result of dysfunctional dynamics; etc.” (Kidd et al., 2017, p. 1)

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Transcript for *Circle* video

[*Editors' notes:* Places where Indigenous language is spoken are indicated in square brackets. Words from Indigenous languages, when written out, are italicized. Cree words are not capitalized. A few ceremonial gestures are described within square brackets.]

Kelly, L., Bourque Bearskin, M. L., Downey, B., Perley-Dutcher, L., & Chakanyuka, C. (2023). *Circle video*. [Video]. In R. Starzomski, J. L. Storch, & P. Rodney (Eds.), *Toward a moral horizon: Nursing ethics for leadership and practice* (3rd ed.). University of Victoria Libraries. <https://hdl.handle.net/1828/14970>

Opening Section

CHRISTINA CHAKANYUKA: Let's begin. So, just a big welcome, everyone here today. Lisa, you'll open in a good way for us as we come together with the intention to share stories and knowledge and ideas. I'll just pass to you to begin.

LISA PERLEY-DUTCHER: [Wolastoqey words. Introduces herself.]

[Shows a short braid of sweetgrass.] Time to smudge.

[Wolastoqey]

Bernice and Leanne, they're going to do smudge, they're going to carry on the smudge because I'm in a place where I can't carry the smoke, so they will carry the smoke. And we'll all do the prayers.

[Wolastoqey]

[Touches the top of her head.]

[All of the circle members are now visible on the video.]

First smudge your head so that you may take good care of your thoughts.

[Runs her hand in front of her eyes.] Your eyes well too so that you may see all the beauty of the Earth.

[Leanne and Christina touch their eyes; from then on Leanne, Christina, and Mona Lisa keep their eyes down and closed most of the time. Bernice waves a feather gently.]

[Lisa touches her ears.] Smudge your ears well too so that you can hear the great Mother's words and give thanks.

[Touches her nose.] Smudge your nose so that you can smell all the medicines around you and give thanks.

[Touches her mouth.] Your mouth as well, smudge it well, so that you can honour your language and give thanks.

[Touches her chest over her heart.] Smudge also your heart so that you may honour the love in your life.

[Now Lisa only is visible. She rubs her hands together.]

Smudge your hands well, so that you may care for everything on the Earth and then give thanks.

Smudge your legs well too, so that you may walk the Red Road and give thanks.

[She moves her hands down from her face over her upper body.] Smudge well the front of your body so that you can remember the ones who went before you, and give thanks.

[She moves her hands, one at a time, behind her head.] Smudge well your back of your body so that you can remember the ones who are yet to come. Give thanks.

[Once again all members of the circle are visible. The smoke is visible in Bernice's picture.]

[Lisa shows the sweetgrass briefly.]

I'm just going to sing a welcome song, very short welcome song, for those who are joining our circle today. [Lisa brings out her drum.] It's important to do the welcoming, take the time to welcome our ancestors into this space with us in this circle. And this is a song of doing that.

[Song in Wolastoqey with drumming.]

[All members of the circle are briefly visible. We see the feathers that Mona Lisa and Leanne are holding.]

MONA LISA BOURQUE BEARSKIN: Thank you, beautiful.

Round One: Introductions

LISA: Welcome. [Wolastoqey] So, my name is Lisa Perley-Dutcher and I'm from the Wolastoqey People here in Wolastoqey territory, also known as New Brunswick. I am living in what's called *Eqpahak* (where the tide stops coming in), which is the

Fredericton area, and I am from the Crow Clan, and I've been working as a nurse for about 30 years, retired now.

A lot of my practice has been around mental health, community health home care, education in nursing. And, you know, volunteering and trying to motivate our young Aboriginal population to take up the practice of health care and to work toward the betterment of our people's well-being.

Currently, I'm working as a language warrior. And my focus right now is on starting a Wolastoqey, land-based immersion program called Kehkimin.

And so, my focus is there because I believe that's where healing begins, is at the core of who we are, as the core of who we are is language. And I think that's a good place for us to start so I believe that, you know, my language was stolen from me and I and I'm reclaiming that back and this is my healing. And so I can give that back to my own people and work in solidarity with them in reclaiming our language. [Wolastoqey.]

BERNICE DOWNEY: [*Nakawēmowin* – Saulteaux] *Boozhoo! Mino-giizhigad.* Bernice Downey, *Nigan ekwe, Ndishneekaz.*

Greetings, good morning. My name is Bernice Downey. I have also been given a name of Head Woman. I'm an Ojibway Saulteaux woman. My family ties are with Lake St. Martin First Nations in the Treaty 2 area of Manitoba where my mother was born. I come from the waters of Kakeganka-Evelyn Sinclair Desjarlais, who came from the waters of Caroline Sinclair, who came from the waters of Elizabeth Beardy. I'm a *nindaanis* (daughter), a *Hini-maama* (mother), a *Nokomis* (grandmother), and a *Shugo* (Aunty).

The community lived experience is an urban one. I've lived in Ontario most of my life. I'm a proud Indigenous woman and my culture is important to me. I do not have a clan. I enjoy learning our language. My mother chose not to teach her children on the language even though she was a fluent speaker, because she was fearful that we would be discriminated against. I have participated in many traditional ceremonies. I also have Celtic settler ancestral roots from County Down, Ireland, a culture I know less about, but I'm also proud of. I'm presently

living and working on a traditional territory of the Chippewa Odawa Potawatomi, and Delaware and Oneida Nations.

I'm a medical anthropologist and Assistant Professor in the School of Nursing and in the Department of Psychiatry, and a long-time clinical nurse. I'm also the inaugural Associate Dean, Indigenous Health in the Faculty of Health Science at McMaster University. I have been a strategic lead for the development of the *Mino Bimaadiziwin Mishkiki aapjishnik Gamik – Tsi nó:we ayakonniyóhake táhnon aonsayakota'karitehake*, also known as the Indigenous Health Learning Lodge. *Kichi gaygoomah kowabundiung*. It's great that we see each other here today.

MONA LISA: *tân'si nitôtêmtuk*, Mona Lisa Bourque Bearskin *nit'siy'hkâson Amiskosâkahikan nêhiyaw peyakôskân, ostêsimâwoyasiwêwin nikotwâsik* Beaver Lake Cree Nation, Treaty 6. I was born into, I identify with my matrilineal side. My grandmother was Marianne Bearskin, born on the land, traditional descendant of Treaty 6 signatories in Beaver Lake. I currently am living on the traditional and unceded territories of *tk'emlúps te secwêpemc* and I have been, I often say, born into nursing and I have born two of my girls into nursing. And I am Associate Professor at Thompson River University and currently hold BC Indigenous Health Nursing Research Chair, and I am grateful and privileged to be working with the diverse group of First Nations, Inuit, and Métis nurses here in British Columbia.

And just want to honour my fellow sisters here, Bernice and Lisa and Leanne and Christina, for the work that you do and have done for generations, well, decades, I'll say, when we began our early nursing days with the Canadian Indigenous Nursing Association, and so bringing that work forward still, you know, four decades later is a very important mission and service that we all give our whole essence of who we are to Indigenous health nursing. *aiy aiy*. [She holds up a feather.]

LEANNE KELLY: My turn. *Tawnshi kiya*, Leanne Poitras Kelly *dishnikashon*. So as it states in my bio, I am from Saskatchewan originally. My family ancestry is from the Road

Allowance community of Katepwa in the Qu'appelle Valley on my mother's side, and Turtle Mountain, North Dakota on my father's side. I'm a mom of two sons, and I'm married to an Irishman, which has granted me access to White spaces and economic privilege.

I currently reside on Coast Salish territory of Vancouver Island in a town called Ladysmith, and I own a home on the unceded and occupied lands of the Stz'uminus First Nation. I've been a nurse for 33 years and my nursing work has always been in First Nations communities in Saskatchewan and in BC.

I was not raised in my cultural community, but in small farming towns in the prairies as my dad worked for the CN railway and so we relocated to where the work was. My experience of being Métis-Cree has been one full of dichotomies. Being visibly Indigenous, in a white farming community in the 70s, created a real landscape of trying to fit in, surviving racialized violence, and subjugating a lot of my family teachings to safer and secret spaces. Our parents as well chose not to share the Mishif language with their children.

And so, our connection to our Métis roots really only happened when we would return to our family, our family ancestral home for gatherings. My adult life has been spent reclaiming my Indigenous space, finding my voice, and asserting my right to be seen and valued.

I recently moved into a faculty position at the University of Victoria in the School of Nursing, and I realized I was hired because of my Indigeneity, and I both struggle and celebrate that fact.

I also want to acknowledge that I'm not an expert on ethics, nor do I have any claim to the knowledge that I share. I speak from lived experience and as a beneficiary of many teachers that have supported me. Briefly, I'd like to just acknowledge my parents, the journey that they travelled, my siblings, extended family, of course, all of those teachers, my nursing colleagues that I've worked alongside, and in particular the nursing leaders who have literally fed me, including people like Madeleine Dion Stout, Lea Bill, the late Jean Goodwill, all the nurses that are in this space today. My Métis Knowledge Holders, which is Maria

Campbell, Brenda McDougall, Kim Anderson, and all the many Indigenous Knowledge Holders that we have both learned from along the way, and that we continue to seek guidance from, and those, just to mention a few, are people like Cora Weber-Pillwax, Eber Hampton, Shawn Wilson, Kathy Absolon, Margaret/Maggie Kovach and the list goes on.

I just say these names because their writing continues to inspire and inform and propel me and gives me hope. For just naming the space and building it. I'll leave it there.

CHRISTINA: *Mahsi* Leanne. *Mahsi* everyone. My name is Christina Marie MacDonald Chakanyuka.

I am Métis with Dené and Cree-Métis matrilineal roots in the Thebasha and Athabasca region of Treaty 8. I grew up in a small town in the Northwest Territories called Fort Smith.

On my mother's side of my family, I am connected to the Evans and Barrett families in England. My grandmother immigrated to Canada as a nurse midwife, literally trained at the Florence Nightingale School of Nursing, and came to Canada, met my grandfather, Ernest Villebrun, who was impacted by the *Indian Act*, which, you know, Bill C-31 was passed and again I don't think a lot of us nurses know this history. I'm only learning it now. You know, I was born in 1985, Bill C-31 was passed, and my grandfather got his status back because his mom, who was Dené, married a Cree-Métis man. And so, my mom and her siblings, and us, we've lived as Métis and I am very proud to be Métis. I identify strongly with that.

But it's a different sort of ancestral history for each individual person. And that's something in an introduction that I'd like to share that uniqueness that everybody brings. There's no such thing as pan-Indigenous.

On my father's side, Ian MacDonald, and my mom is Marie MacDonald. On my father's side, his parents Helen and Donald MacDonald were eighth-generation Scottish settlers living in Prince Edward Island on Mi'kmaq territory.

So, I just recognize that right now, I'm on Coast Salish territory, ɫəkwəŋən territory—it's not my homeland. I do feel I have an obligation to be present and to be tending to wellness

for myself and for my family while I'm here and being respectful and walking softly on the land here. And if I want to really feel whole, I go home to the north, for sure.

And so yeah, with that, I want to say thank you, everybody, for your introductions, sort of round one to get us started. Lisa, for your opening in such a good way with a prayer and with a song bringing us all together. Leanne, thank you for your vision that you've shared, and I want to say also when you were sharing the teachers and acknowledging the Knowledge Holders who have inspired you, I couldn't help but think yes, those are the names that we hear so much in this circle and in other Indigenous circles when we think about Indigenous Knowledge that has been sort of shared within ethical spaces in academia, recognizing that, you know, it's like language is living. So is this, this knowledge, so is our ancestry, so is the matrilineal ways of knowing, and so I honour that the women in this room here, Mona Lisa Bourque Bearskin is sort of an academic auntie of mine, Bernice Downey and Lisa Dutcher as well. And Leanne, a real wonderful friend, and sister scholar, and I'm just thankful to be here and I'm just here in the role of timekeeper and to introduce sort of what we're doing today.

Transition/Round Two

CHRISTINA: I just wanted to start off with a quote by esteemed Indigenous scholar Cora Weber-Pillwax, providing an overarching theme to assist us in focusing on ethical actions.

She says, "decolonization will not be attained through discussion discourse or critical theory. Decolonization is not merely a concept it evokes and stimulates Earth and people shattering consequences on a daily basis."

That's Weber-Pillwax (2021) page three and Leanne, I just want to say you and Lisa, both of you, have shared Cora's teachings with me and I see it as sort of a matrilineal passing down of inspiration as well.

And so, we're going to be, instead of writing this chapter, having the time to be practicing orality, going around in circle.

We have three rounds. The first round of circle, we've already completed, the introductions. So, our first [editors' note: Christina meant to say "next"] round will be "What does Indigenous ethics mean to me?" And each of us will take a moment to share some thoughts and insights based on what we've brought.

Round Two will be reflections and responses, and Round Three will be a final round of take-home thoughts. And so, with that, I'm happy to pass along "What does Indigenous ethics mean to me?" and I think we are planning to start with Leanne.

LEANNE: Okay, so, as I mentioned in my opening, I never want to claim that I'm an expert on anything. And so, I guess I just want to share a little bit of something I've learned, and I think it probably just builds off the first round that we've had. I wanted to draw attention to the listener to consider what positionality as an ethical foundation might mean to you.

You've heard all of us introduce ourselves in ways that provide a location. It tells you who we are. It tells you what we bring to this conversation. And I think that learning this skill to interrogate yourself is an important first step. It's, I guess it's when you think about Indigenous relational ethics, and wondering, okay, what do I need to do?

First step is who are you coming to this discussion? It involves interrogating and reflecting on your own relationships to the land where you live, making what might be invisible to you become visible.

So, for people like me, an Indigenous person, not living on my own homelands, self-location is very important in terms of being ethical and accountable. I have to acknowledge that I'm a guest on someone else's land, and that I cannot speak on behalf of the people of this land, nor can I claim space that doesn't belong to me. And this is an important, important consideration, because we were migrants, we move, right, we relocate, we travel.

And so, there's protocols around entering into another territory. There's consideration that needs to be given. We need to know what kind of relationship we hope to have with the people who are there. And so, that involves us doing some

work. Who are the people that we are becoming neighbours with that we are going to have relationship with. And so, for me, being a Métis-Cree nurse from Saskatchewan, moving to Coast Salish territory, it's my duty and my responsibility, and it's my ethical work to uncover what this means. And especially now as I inhabit a faculty role on a territory, not of my own. There's always some tension or some complexity that exists there. And so, this tension of knowing that I'm on someone else's land, I am taking up Indigenous space that potentially could be taken by someone who is local, makes me very mindful of the responsibility that I have, to be transparent, to be reminded to walk softly, and to engage with the communities of this land in a way that elevates their experience and their presence.

And so, for non-Indigenous people, this holds true as well. And I would just say, to think about the journey to understand your own relationship with the land you're on. You know, many of my students who are settlers, non-Indigenous new Canadians say, well, I know nothing about Indigenous history or culture, I, you know, had nothing to do with residential school. And so, the work really is to interrogate these statements. Why is this so? Why do you not know anything? What has interfered?

It's a myth that there isn't a relationship with Indigenous Peoples. And this myth has been created and narrated by mainstream societal forces that want to maintain status quo, and to keep Indigenous communities separate. We live on these lands as beneficiaries of a colonial system, and so interrogating your own space and seeing how you have benefited. I mentioned earlier that I own a home in Ladysmith, and this is not necessarily a possibility for people who are born and raised in that territory.

And so, I know I've been a beneficiary of these systems and understanding how that has come to be and working to find ways that we can get equity in to action. It's an ethical responsibility to interrogate your own position, self-location, uncover and discover the relationship, asking yourself, what is your ancestry? What is your family trajectory in relation to the

Indigenous people on the land that you live alongside?

These communities are not invisible. Interrogating your position is an opportunity to do this work.

CHRISTINA: Thank you so much Leanne, we'll pass to Bernice now.

BERNICE: *Miigwetch* for this opportunity to contribute to the collective understandings regarding ethics in an Indigenous context. While I acknowledge I am not an expert in the academic field of ethics, I hold up what I have learned and the wisdom I hold from my lived experience and that of my mothers, aunties, friends, and colleagues.

My pathway from a long nursing career to the study of medical anthropology was not an abandonment of nursing, rather a choice of resistance to delve deeply into questions and inquiry and ethics regarding Indigenous Knowledge and health literacy, to hopefully inform biomedical science-oriented programs. So my career and experience has really been about questioning how we do things in health for Indigenous Peoples and how we need to do them better. So, colonization has negatively impacted how we live and draw on our cultural ways as an expression of ourselves and our connection to the world around us. This can be viewed as epistemic injustice, and I'll come back to this concept in a moment. However, as mentioned in the introductory comments, we're at a point in time where place and space for an Indigenous voice is suddenly very visible, valuable, and in demand. So, it's important to note that Indigenous voices all over the globe have been intentionally and pragmatically voicing their realities, aspirations, and self-determining solutions to anti-Indigenous oppression in all spheres of our lives. For example, at the international level, Indigenous peoples gathered for over 30 years to inform and develop the document known as *UNDRIP*, or the *United Nations Declaration on the Rights of Indigenous Peoples*. Similarly, at the national level, First Nations, Inuit, and Métis Peoples have given voice to their lived experiences and calls to action through processes such as the 2015 Truth and Reconciliation Commission of

Canada.

They have called for an ethical space. Willie Ermine discusses the concept of ethical space and action and describes how he adapted this concept in response to his experience of frustration within the academy. He needed to talk about this area between knowledge systems and what was happening cross-culturally, how he experienced his own community, his own people, and his knowledge that didn't jive or fit with dominant Western systems. And he describes this analogy as our cultural (my term) slates being wiped clean and being recreated with dominant ideas. So, he argues that an ethical space can create ideas of dialogue where we can take control of our humanity again, our visioning, our conversations, how we construct our world, our societies that are based on our humanness, not prescriptions from institutions or systems that try to run our lives.

So, the concept of *epistemic injustice* refers to those forms of unfair treatment that relate to issues of knowledge, understanding, and participation in communicative practices. These issues include topics such as wrongful treatment and unjust structures in meaning-making and knowledge-producing practices such as exclusion and silencing, or unfair differentials and authority or epistemic agency.

So Indigenous Peoples have been making the case to take down the systemic curtains and *UNDRIP* affirms that we are organizing ourselves for political, economic, social, and cultural enhancement, in order to bring an end to all forms of discrimination and oppression where they occur. This fundamental importance of the right to self-determination has been affirmed in multiple international instruments, and *UNDRIP* recognizes the urgent need to respect and promote our inherent rights as Indigenous Peoples that derive from our political, economic, social structures, and from our cultures, spiritual traditions, histories, and philosophies. So, when we link this to Indigenous ethics, that are defined as moral principles that govern a person's behaviour or the conducting of an activity, Indigenous thought leaders, philosophers, and academics have articulated understandings of Indigenous

ethics, most notably in the research context. These concepts are now embedded in Indigenous-led research reform literature and have formed the systemic change we see now within the three major research funding entities. Diverse groups of Indigenous Peoples can align ethical concepts with their own values of honour, trust, honesty, and humility. And these values reflect a commitment to the collective, and are described as embodying a respectful relationship with the land. I don't recall my elders using the term ethics, but I do recall references to doing the right thing, living in a good way and have over many years. This has guided my own moral compass. And finally, our knowledge can be characterized as bundles that are in flux, knowledge that's passed on over generations through oral traditions carried by Elders and storytellers. This circle process [makes a quick motion indicating a circle with her hand] that we are now in is an attempt to make meaning in a collective way. And it's an example of how we continue a cultural method or way of life, sharing our stories, picking up the bundle to add our own truth to it, and in this way, the circle takes on a life of its own language. *Miigwetch*.

CHRISTINA: Beautiful, thank you so much, Bernice.

Let's finish this round. We've got two more folks left. Lisa Dutcher.

LISA: *Woliwon* (thank you) Bernice, for your words of wisdom and your inspiration today and for over the years.

You know, I really am so honoured to be part of this circle of Knowledge Keepers. When I was asked to reflect upon what ethics in nursing would mean to me, I had to go back to my language and think about that because I'm so into my language right now [makes hand gestures for emphasis] and trying to bring meaning to my own life and reflecting back on perhaps my practice as a nurse, and what—how did I get—how did I practice ethics in my, in my profession. I looked back and I spoke to Elders and looked at some resources and stuff and, and we have a word that kind of reflects back to this concept [more hand gestures for emphasis]. It's not an exact English

translation, but it's how we described somebody who lives well, and has a principled life—*Woli-pomawsu*. So *Woli-pomawsu* is somebody who has a principled life. This requires action again. It's not something that's a stagnant process. It's something that is always in motion. And it's a verb-based language and this is critical because in Indigenous epistemology or in our worldview, we definitely see things as action-oriented and words are part of it, but also there has to be action behind those words. And that's always, I think that's pretty consistent throughout most of our various Indigenous cultures.

One of the phrases that really stuck with me growing up was this concept of *wicuketultiq*. I was always taught to help those who were in need of it. It was the core of who I was, what I was always taught, and I was taught it not by being told to do it, but I was told, okay, now it's time to go help this Elder, now you have to go help this Elder, you have to go get groceries for her, you have to go clean her house. So, my grandmother was teaching me, without telling me, about my responsibility to community, my responsibility to our Elders.

And this was really the foundation of my nursing career, because this is why I actually went into nursing because I had that caring, and maybe she saw that in me was that caring ability to move it into action. And you know, this basic teaching, of caring for others in the teachings that she gave me really, it covers so much, it covers all the sacred, you know, teachings, seven sacred teachings, and I think, you know, if we were to follow our basics, you know, seven teachings of respect, caring, sharing, you know, responsibility and, and respect and empathy and all of that (I can't remember all of them, right now), but I mean, that you get the idea of that, you know, these are the foundation of our relations of how we respond to one another, right?

So, you know, I went into nursing with this foundation already. So, to me, I think it made me a good nurse in that, you know, and I've always had people come up to me and say, "You were the best nurse I had!" [Laughs.] So, I often wonder like why, why, why was that? Like why, why am I different?

But it's that foundation from my grandmother. And I think she really embedded that within me to be caring, and that's the healing part of nursing. And if you take that out it's not the same and there's a word in our language, *nuci-kikehtahsit/nutsihpiluw*, which means a healer, and that's how they refer to us. The nurses and doctors are the same term because that's how our people see us. We're the healers of modern day. Right? So, because we know how to bring that, that carrying, that responsibility.

There's been an interruption in our cultural ethics or our way of being a principled life because this whole individualism versus collectivism has really disrupted that—those teachings because we've become so focused on self that, you know, really our responsibilities have kind of been disrupted in that way. And really, especially even today, it's even more important because it's a matter of survival—was a matter of survival *then*, it's *still* a matter of survival for us, as the human race is we have to get back to collectivism. We have to be able to look out for one another. And that drives ethics, that drives a principled life, you know, and like I say, it's what grounded me in being who I am, and my own experiences as going into nursing and learning the profession from a Western point of view, I often felt conflicted, because, you know, I wanted to establish meaningful relationships with clients, but I was often told, Oh, no, you can't establish those kinds of like close relationships with your clients because it's not professional. Or you can't, you know, you can't bring those stories to the table because you can't back them up with the literature; and so your knowledge is not enough, your Indigenous knowledge isn't enough. So, these are the kind of stories that have been told to us in in our profession, and I think I believe that it's kind of come to an end, that that kind of way of thinking is coming to an end and you know, we are being listened to now more than ever and I think this is, you know, something that, you know, if our allies want to be true allies, you know, I think that role of advocacy of, you know, allowing us to step forward to bring our teachings forward in a good way will not only benefit our own people but will benefit the entire world. I believe that and I think that you

know if we were given space to bring these teachings forward it would help to, like really complete the circle [makes a circling motion with her hand] of like, where we need to be. I mean, my Elder just told me this the other day, she said, you know, my mother used to say, my mother used to say it over and over again, is there's going to be a day when it's our day.

This is our day. And this is the time when we need to speak these truths. And we are hoping that you are listening and that, you know, not only will you listen, but we hope that you will hear what we are saying and that somehow you will find a way to incorporate these true ways of caring and teaching, which will guide your ethical behaviour [we see that Lisa is holding the sweetgrass again]. You will do the right thing when you're come from that good place in your heart [points to her heart]. You will always do the right thing, because you're listening. [Wolastoqey words as she lifts the sweetgrass.]

CHRISTINA: Aah, this is beautiful. It's such a privilege to be here with your wise ones. I remember Madeleine Dion Stout once saying, you know, we were nurses too, and a family member had told her that, pre-contact, right? We were nurses too, it didn't start with Florence.

Lisa, I'm really happy to pass to you, Mona, Mona Lisa, and for you to share your thoughts and your—what does ethics mean to me.

MONA LISA: *sâkhitowin*. [To love one another.]

kisâkhitin. [“You are loved by me.”]

And with that I want to give back to each one of you women here today that enormous amount of love that is my ethos for being. It's something I've had to come to learn—how to love—as a result of epistemic injustices that Bernice articulated very nicely for us. And also the support and the guidance in Leanne's words on the importance of interrogating self.

And my colleague, Lisa, really bringing full force the importance of the individual in the collective, and it's the collective that we're here to serve. And that's the ethos of practice and grounding our work in our own language, and our own knowl-

edge systems that are our own way of being, and acknowledging those trailblazers that have come before us—*kikatikameskew* [Lea Bill], *kētēskwew* [Madeleine Dion Stout], *gilgaaletlilok* [Evelyn Voyegeur] and *maskihkîwiskwêw* [Alice Reid]. My four key knowledge holders that I've come to learn, really, the essence of my own Cree ontology and how coming to reconcile how nursing facilitated that separation of my identity of who I was as a nurse, as a human being, and taking the space in places of love that we can now exchange and help *transform* the future for those who have yet to come behind us. And so, one of the key principles of Indigenous ethics that I think about, it's always in constant relation. It's constant relation with the land on where we all live, and we benefit from. It's that constant relation with the air we all breathe. It's that constant relationship with the water, the most commodified natural resource across the globe. And we're losing and we're draining Mother Earth and we see that happening today, in the global issues that we're facing.

Mother Earth is suffering from an infection, and you can see it from the natural disasters across every corner of this globe, in the country and the world and the human devastation that we're seeing with human kindness. And so, as nurses, how do we speak up and how do we create the space for something I've come to know, *mâdaw ohkamâtowin* (working together to help each other). How do we help each other? How do we help move each other in a good way?

And a good way doesn't mean that we don't have these difficult conversations, that we don't give sharp feedback. And that we hope that it's taken. As you mentioned, Lisa, with ears wide open. We have—it is time now. We are in that time. You know, I think about Jean Goodwill, you know, in her advocacy back in the early 70s. You know, the leadership she provided, the leadership Indigenous nurses for back then, you know, four decades ago, the first adviser to the Minister of Health in the country? And we have, we've lost some of that and we're now starting to gain some footing. So Indigenous ethics, to me, is honouring that sacred space, and it's honouring our language and four key terms that I just want to be remindful of

that I'm always remindful that I bring into my nursing: *tân'si*, *tawâw*, *tapwew*, *tipi* were gifted to me in my teachings from Madeleine. And when we talk about *tân'si* it means it's more than "hello." When we're talking and we're introducing that concept, it's actually honouring the spirit of another person. And that's what's missing in nursing. We've done a really good job of removing the spirit. We have a sickness of separation. And so that brings the significance of the next word, *tawâw*, there's room for everybody here.

This is that distinction base. We need to reclaim our own identity; we need to reclaim our own positionality; we need to move beyond those impacts of those legislated identities. We need to honour *UNDRIP*; we need to honour the fact that health is a human right, it has not been afforded to First Nations, Inuit Métis, people in Canada. Which brings me to the next word. *tapwew*. Which means to speak our truth.

And this is time I think that's the time we are at reconciliation. We are speaking our truth. And debate is about equal opportunity for equal outcomes. This is not about equality across the board. We need to look at those inequities and outcomes. Enormous amounts of dollars in funding into research in nursing education has continued over the last five decades and we continue to see the same issues.

And so in nursing, I draw on Levanis, a philosopher, who really talks about ethical responsibilities when we look in the face of the other, really spoke to me, when I was on the land and during one of my ceremonies, was looking for that face and I looked up through the trees and I saw this beautiful image of the face carved in the mountain. The image of a face looking up at mother sky, and it was just like a huge sign to me that we *are* living on the backs of Mother Earth and we *do* benefit. And if we really, truly look in the face of Mother Earth and the patients when we go to their bedside, that's that ethical responsibility we have. Well your mind talks about that, right?—that relational space and that energy transformation that when we come into someone else's space, in their hospital room at their bedside, that we don't take up too much space. We're so trained as skilled practitioners, with IVs and catheters

and medications, and we bring that expertise, but what we don't, what we need to work a little bit harder is the spirit. That spirit of nursing care and that service that we have, and I just want to finish off with when I think about nursing ethics.

One quote by Stan Wilson, you know, and I've heard you guys quote other scholars, for me it was Cora Weber-Pillwax—first Indigenous woman practitioner to get a faculty position to bring Indigenous education into a program of study. So, when I think about Indigenous ethics, both just as a human being and what I bring to my nursing practice, I'm always reminded of what Stan shared with me one time, and I quote him here now. He talks about

I'm walking on the sacred ground. If my ancestors died here, the remains are in the soil, the remains have become part of the soil, enriching it in the process. The grass that grows here would be getting its nourishment from the soil and from the remains and so my ancestors are in this grass. My ancestors are in this water. My ancestors are in the trees, and we share and breathe life with them every day. (S. Wilson, Opaskwayak Cree Nation oral communication, May 2009, University of Alberta)

The life of the leaf in the tree in the bird that eats the worm, and that shows that reciprocal connection to all of life and how we're all connected, just through even one breath. And I'm grateful that I could share this breath and this energy through this virtual seminar with you all today. *aiy aiy*. [She lifts her hands up.]

CHRISTINA: *aiy aiy*, Lisa. Thank you so much.

Round Three/Closing

CHRISTINA: Well, we've got just a few minutes left. And so, we're going to do a final just closing round in one minute. One

minute to share what do nurses need to know about Indigenous ethics? We'll start with you, Leanne.

LEANNE: All right. Okay, one minute or less. I can't say that I can really capture it all in. But, as you know, we're all bringing our teachings to the circle.

I've been told time and time again by many people from my location, the idea of *Wahkohtowin*, which is all about relationship, relationship, defining what that is and within that relationship, articulating, what is your obligation. What do you owe? What do you build on and who has taught you these things?

Maria Campbell says to me that nothing will change without *waskewiwin*, which is movement. You have to take action, move, get that spirit rolling. And to do it right means to identify your obligations once you've done the learning.

CHRISTINA: Beautiful. Thank you, Leanne. *aiy aiy*, Bernice.

BERNICE: *Miigwetch*, Leanne, *miigwetch* everyone for your beautiful words and teachings today. I'm just reflecting that the common thread does seem to be language and, you know, the beauty in hearing how we align what we learn from the academic side to what we understand in the language. It's just a beautiful moment whenever it happens. So, someone who lives well, you know, it gets to the point it reflects who we are, and it reflects how we bring the spirit into nursing, into health care.

And also speaking our own truth that Lisa mentioned, you know, *obdawin* in Anishinaabe, and my affirmation of *paydshiquin*, which is a Saulteaux word, meaning to create a constant such as a circle that can be applied to the concept of "completing the circle," and I wrote about that as the essence of a proposed IND-equity model.

And of course, the circle refers to our diverse cultures. So non-Indigenous nurses can assume the ally role and work alongside Indigenous nurses and other practitioners, including traditional practitioners, so that they can complete the circle in *their* roles alongside us, and in turn learn to understand what ethics means to us and what that ethical space can be. *Miigwetch*.

CHRISTINA: Thank you, Bernice. Lisa.

LISA: I really, to sum it up in one minute is to say, really honour and respect yourself.

Because truly, if you cannot do that for yourself, you cannot do that for other people. And I think that if you go back and you reflect on what is the foundation of your ethics, where do you get your values and your beliefs from? What are those values and beliefs? Are they congruent with the people that you are working with? If they're different then you need to learn about how they're different. I really think that's really because I mean, values and—you know, those come from a cultural perspective.

So, ethics actually comes from a cultural perspective. So, how we define what's right and wrong, comes from a cultural perspective. So, we need to see it, try to see it for ourselves, from through our own eyes, but also try to see it from the other's eyes as well. To see what is their truth.

What are they ... what constitutes their, their principled life, and, and try to be open to that, and learn. I think, to me, that's really what, you know, being a healer is about. And your responsibility as a healer requires you to do that.

[Wolastoqey words.]

CHRISTINA: Beautiful. Mona Lisa, over to you.

MONA LISA: Oh, wow, just so very grateful. Key messages for me, I think, for all nurses and particularly because the space is Indigenous. It's being able to honour the spirit of Indigenous nursing knowledge, so that we can all reclaim our own nursing bundles in our healing bundles, and that we can continue to be of service in a good way, and that we can whatever we do, the responsibility to bring community with us has to be central to the work moving forward. *aiy aiy*.

And so, with that, my final words of *kisâkihitin*, meaning you are loved more dearly than myself.

And that is the epitome of Indigenous ethics to me that I always uphold everyone else first before myself. *aiy aiy*. [Mona

Lisa brings her hands up. As the camera shows all the circle members, we see Leanne and Lisa bringing their hands up at the same time.]

CHRISTINA: Thank you so much, Lisa.

Additional Resources

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