PILIRIQATIGIINNIQ ‘Working in a collaborative way for the common good’: A perspective on the space where health research methodology and Inuit epistemology come together

By Gwen Healey, M.Sc. and Andrew Tagak Sr.
Qaujigiartiit Health Research Centre

Abstract

Increasing attention on the Arctic has led to an increase in research in this area. Health research in Arctic Indigenous communities is also increasing as part of this movement. A growing segment of the research community is focused on explaining and understanding Indigenous knowledge and ways of knowing. Researchers have become increasingly aware that Indigenous knowledge must be perceived, collected and shared in ways that are unique to, and shaped by, the communities and individuals from which this knowledge is gathered. This paper adds to this body of literature to provide Inuit perspectives on health-related research epistemologies and methodologies, with the intent that it may inform health researchers with an interest in Arctic health. The Inuit concepts of inuuqatigiititiarniq (“being respectful of all people”), unikkaaqatigiiinniq (story-telling), pittiamiq (“being kind and good”), and iqqaumaqatigiiinniq (“all things coming into one”) and piliriqatigiiinniq (“working together for the common good”) are woven into a responsive community health research model grounded in Inuit ways of knowing which is shared and discussed.

Acknowledgements

The growth development of this model and this centre over time has been a group effort. Valuable guidance, feedback and support has been provided by Shirley Tagalik, Janet Tamalik McGrath and Jamal Shirley in the development of this paper.

Key words

Inuit, epistemology, health research methods, relational knowledge, Indigenous knowledge.

Introduction

There has been a significant and increasing amount of attention on the Arctic in terms of research, press, exploration and resource development. Health research and research involving Inuit in Canada’s north has also been increasing. Community-based participatory research is a method that has been promoted, however, even though this methodology recognizes the role of community in the research, it still holds the Western scientific worldview above others. Concurrently, a growing body of literature has focused on articulating Indigenous knowledge and research epistemologies, leading the way for greater discussion of Western and Indigenous research approaches, and contributing to more meaningful research (Alfred 2005; Barnhardt & Kawagley 2005; Battiste 2002; Battiste & JY 2000; Deloria 1995; Kovach 2010; Wilson 2008). This paper adds to this body of literature by providing Inuit perspectives on health-related research epistemologies and methodologies, with the intent that it may inform health research approaches in Arctic communities.
Inuit are the Indigenous inhabitants of the North American Arctic, whose homeland stretches from the Bering Strait to east Greenland, a distance of over 6,000 kilometres. Inuit live in Russia, Alaska, Greenland and the Canadian Arctic and share a common cultural heritage, language and genetic ancestry. Before contact, small groups of families travelled together to different camps and hunting grounds. In the Qikiqtaaluk\(^1\) region alone, for example, Inuit lived in small, kin-based groups in over 100 locations throughout the region\(^2\) \(\textit{QIA 2012}\). Of the approximately 150,000 Inuit living in the Circumpolar region today, 45,000 live in Canada’s north. Canadian Inuit lands are known as \textit{Inuit Nunangat} and comprise four regions: Nunavut Territory; Nunavik (Northern Quebec); Inuvialuit Settlement Region (northern NWT); and Nunatsiavut (northern Labrador). Comprising one-fifth of Canada’s land mass and 60% of the nation’s coastline, Nunavut occupies the largest geographical area of all the Inuit Nunangat. When the Nunavut Act was passed in conjunction with the settlement of the Nunavut Land Claims Agreement in 1993, Nunavut became Canada’s third territory. Nunavut’s new territorial government was formally established in 1999. As the authors of this article are from Nunavut and this is the context with which we are most familiar, the majority of the references in this article are to Inuit communities in Nunavut.

**Ways of Knowing**

Epistemology is the theory of knowledge, questioning what knowledge is, how it is acquired, and the extent to which a given subject can be known \(\textit{Thayer-Bacon 2003, p. 18}\). Epistemology is also the investigation of what distinguishes justified belief from opinion, particularly with regard to methods, validity and scope. It is the starting point upon which we build our theoretical assumptions. What do we know and how do we know it? Do we know it individually or collectively? Is there more than one way to know something? Do we possess knowledge or do we engage with it? Or both? Epistemology is the space in which these questions are posed and explored.

**Indigenous Ways of Knowing**

A growing segment of the academic community is focused on explaining and understanding Indigenous knowledge and ways of knowing. This group recognizes that such knowledge is perceived, collected and shared in ways that are unique to these communities. Battiste \(\textit{2002}\) states that the recognition and intellectual activation of Indigenous knowledge today is an act of empowerment by Indigenous peoples. Indigenous peoples throughout the world have sustained unique worldviews and associated knowledge systems for millennia, even while going through social upheavals as a result of transformative forces beyond their control. Many of the core values, beliefs and practices associated with these worldviews have survived and are beginning to be recognized as being just as valid for today’s generations as they were for generations past. The depth of indigenous knowledge rooted in the long inhabitation of a particular place offers lessons that can benefit everyone, from educator to scientist \(\textit{Barnhardt & Kawagley 2005}\).

In Eurocentric thought, Indigenous knowledge has often been represented by the term ‘traditional’ knowledge, which suggests a body of relatively old data that has been handed down generation to generation relatively unchanged \(\textit{Battiste 2002}\). Grenier \(\textit{1998}\) offers a view that Indigenous knowledge embodies certain characteristics that are not mutually exclusive, such as:

---

\(^1\) \textit{Qikiqtaaluk}, meaning ‘big island’, is the Inuktitut word for Baffin Island.

\(^2\) The Qikiqtaaluk region is the largest of Nunavut’s three regions: Qitirmiut (western Nunavut); Kivalliq (central Nunavut and Belcher Islands); and Qikiqtaaluk (Baffin Island, Ellesmere Island and neighbouring communities).
1. Indigenous knowledge is accumulative and represents generations of experiences, careful observations and ‘trial and error’ experiments.

2. Indigenous knowledge is dynamic, with new knowledge continuously added and external knowledge adapted to suit local situations.

3. All members of the community, that is elders, women, men and children, have Indigenous knowledge.

4. The quantity and quality of Indigenous knowledge that an individual possesses will vary according to age, gender, socioeconomic status, daily experiences, roles and responsibilities in the home and the community, and so on.

5. Indigenous knowledge is stored in people’s memories and activities. It is expressed in stories, songs, folklore, proverbs, dances, myths, cultural values, beliefs, rituals, cultural community, laws, local language, artefacts, forms of communication and organization.

6. Indigenous knowledge is shared and communicated orally, as well as by specific example and through cultural practices, such as dance and rituals (Grenier 1998).

In addition, Battiste (2002) also describes Indigenous knowledge as embodying a web of relationships within a specific ecological context; containing linguistic categories, rules and relationships unique to each knowledge system; having localized content and meaning; having established customs with respect to the acquiring and sharing of knowledge; and implying responsibilities for possessing various types of knowledge.

Knowledge can be viewed as being something that people develop as they have experiences with each other and the world around them (Thayer-Bacon 2003). Ideas are shared, changed and improved upon through the development of understanding and meaning that is derived from experience. Fundamentally, this knowledge is rooted in a relational epistemology—a foundation for knowing that is based on the formulation of relationships among the members of the community of knowers (Thayer-Bacon 2003, pp. 73-98). Through these relationships, knowledge is created and shared.

**Relational Epistemology**

Chilisa (2012) states that

Knowing is something that is socially constructed by people who have relationships and connections with each other, the living and the non-living and the environment. Knowers are seen as beings with connections to other beings, the spirits of the ancestors, and the world around them that inform what they know and how they can know it. (p. 116)

A relational epistemology draws our attention to relational forms of knowing. This differs from the common Western practice of focusing on individual descriptions of knowing. Knowing is informed by the multiple connections of knowers with other beings and the environment, by participating in events and observing nature, such as the birds, animals, rivers and mountains (Thayer-Bacon 2003, p. 183). Wilson (2008) and Getty (2010) identify that knowledge comes from the people’s histories, stories, observations of the environment, visions and spiritual insights. Each of these relationships has implications for how research is conducted.
**Relations with people**

Relationship building is an essential aspect of everyday life experience for Indigenous communities in Canada and around the world. Greetings become a way of building relationships and the rapport among participants and researchers—and readers. From the moment of the first greeting, we are inevitably placed in a relationship through mutual friends or through knowledge, with certain landmarks and events. We become part of the circles of relationships that are connected to one another and to which we are also accountable (Deloria 1995) (emphasis added). From a relational perspective, establishing trust and accountability is part of the development of a relationship with a colleague or research participant (Kovach 2009; Wilson 2008), which then feeds into the entire research method, from establishing rigour to respecting an ethical Indigenous knowledge framework to sharing and disseminating the results of a study.

**Relationships with the land or environment**

Many Indigenous peoples have a physical, emotional and spiritual connection with the land, the environment and the creatures who share this space. For example, a study of Inuit women’s perceptions of pollution found that those women identified with pollution of the land being linked to mental health and wellness in the community (Egan 1998). From the perspective of participants, changing relationships with the land carried over into changing relationships in the community and substance use, ultimately affecting the health of the community overall. The Indigenous relationship with the environment and land also has implications for the way research is conducted. The construction of knowledge has to be done in a manner that builds and sustains relationships with the land and environment, and is respectful of the environment (Barnhardt & Kawagley 2005; Chilisa 2012; Getty 2010). In this context, knowledge is embodied in a connection to the land and the environment. When interviews are used as a technique for gathering data, it is best to conduct them in a setting that is familiar to the research participant and relevant to the topic of the research (such as their home, on the land or in a comfortable community space); this enables the researcher to make connections with the environment and the space where the construction of knowledge takes place.

**Relationships with the spirits**

Spirituality may include one’s personal connection to a higher being or humanity, or the environment (Wilson 2008). Spirituality can be viewed as a connection or exercise that builds otherworldly relationships that are ceremonial in nature. Recognizing spirituality allows researchers to explore the interconnections between the sacred and practical aspects of research. Understanding comes through factual and oral history that connects to ancestral spirits (Chilisa 2012) and/or through dreams (Wilson 2008). Knowledge is also regarded as a sacred object and seeking knowledge is a spiritual quest that may begin with a ceremony (Wilson 2008). Knowing can come through prayer or dreams, as a way that people connect themselves with those around them, the living and the non-living, and the ancestral spirits. In this way, the mind, body and spirit are all involved in gathering information and understanding of the world.

**Inuit Ways of Knowing**

Much of the work involving Indigenous research perspectives originates from First Nations, Native Americans and Indigenous peoples in Australia and New Zealand. Very few Inuit are in academia and no work in published literature to date has provided an Inuit perspective, except for Janet Tamalik.
McGrath (2011), which is the first academic work that articulates an epistemology that is unique to Inuit. McGrath’s (2011) work with the well-known and respected elder, Aupilaarjuk, focused on conveying an epistemological perspective for Inuktitut (Inuit language) knowledge renewal. Given the relational knowledge perspective of Inuit, revitalization of relationships is part of renewing and sustaining Inuit languages. The language is which knowledge is conveyed is critical to the understanding of the knowledge that is conveyed because of the shared relationships between people speaking the language. McGrath and Aupilaarjuk’s collaboration conveys a great understanding of Inuit philosophical and ideological concepts.

Relational Methods for Health Research in an Inuit Context

A relational paradigm begins with the relationships between people as an important aspect of a research framework and employs an inclusive approach, rather than rejection. A holistic, relational perspective is integral to Inuit ways of knowing, but how is this actualized in the research setting? In the following section, Inuktitut conceptual ideas related to health research methods and practices are shared.

Inuuqatigiittiarniq

Inuuqatigiittiarniq is the Inuit concept of respecting others, building positive relationships and caring for others. When each person considers their relationship to people and behave in ways that build this relationship, they build strength both in themselves and in others, and together as a community (Karetak 2013). This is foundational to Inuit ways of being.

Intentions and motivations.

In the health research context, part of building and fostering respectful relationships is clearly articulating one’s intentions and motivations in engaging in a study. Researchers need to be reflexive and ask themselves the questions that community members will inevitably ask them: Who are you? Where are you from? Who is your family? What are you looking at? Why do you want to know about it? What are the risks and benefits of pursuing this work? Who is it being conducted for? What will happen to the knowledge that is shared? How will we learn from each other? A commitment to an approach that is mindful of and focuses on Inuit context, knowledge, questions and perspectives is an integral part of demonstrating respect for the community at large.

Community context.

Whether one is from the community where one is working on a research project or not, an awareness for and understanding of the community context is part of acknowledging one’s respect for it. Engaging with people, place and community in a meaningful way will not only increase one’s own understanding of the community context, but also contributes to a richer understanding of the findings. For example, whether a community has a historical connection to a residential school or is currently experiencing a flurry of resource development, the community context and response to such events plays a role in wellness and in relational ways of knowing.
The formation of the question(s).

Having created a descriptive picture of community contexts and understandings, as well as one’s own intentions and motivations, it is easier, now, to collectively develop the research questions on which the research will focus. Focusing a study in such a way that it will answer community health questions is part of being responsive to the needs of Inuit communities.

Developing and fostering relationships.

The development and fostering of relationships has been a focus of the natural science research community in Nunavut, and some published literature has focused on this (ACUNS 2003; Gearheard & Shirley 2007; ITK & NRI 2007). Sadly, research relationships are too often characterized at the outset by conflict, impatience and animosity; sometimes these barriers can be overcome to build trust, other times they simply cannot. Health research projects can build on existing relationships and/or forge new ones. Some practical considerations for health research include exploring how these relationships are initiated, maintained and supported; what the nature of the relationship might be; and whether a power imbalance exists. Practical implications include how communication is achieved, i.e. through regular meetings and in-person discussions or teleconferences, if over a distance; how direction is chosen and agreements are made collaboratively; how accountability is ensured; and how the methodological approach and sharing of knowledge is agreed upon.

Engagement of community members.

From a relational perspective, participants are engaged, not recruited, to participate in a project. They are engaged through the formation of relationships. A snowball engagement method, for example, focuses on the establishment of trusting relationships. Individuals volunteer to participate in the study or recommend family members, friends or colleagues who they think will be willing to participate. The project is supported by community members, who then encourage others to engage in the study through casual conversations and ‘kitchen table talks’ (Price 2007). Participants should be considered as collaborators or co-researchers when the sharing of knowledge occurs mutually, for example, in photovoice research, story-telling or narrative research, or Inuit Qaujimajatuqangit (IQ or Inuit knowledge) studies. The project is supported and promoted by community members, which strengthens the response to the project, as well as contributes to greater rigour and accountability overall.

Unikkaaqatiginniq

Unikkaaqatiginniq is the Inuit concept related to story-telling, the power of story and the role of stories in Inuit ways of being.

Story-telling and the sharing of experiences.

Kovach (2009) states that a defining characteristic of Indigenous methods is the inclusion of stories and narratives by both the researcher and research participant. In an Indigenous context, stories are methodologically congruent with tribal knowledges (Wilson 2008). The Inuit have a very strong oral history and oral culture. The telling of stories is a millennia-old tradition for the sharing of knowledge, values, morals, skills, histories, legends and artistry. It is a critical aspect of the Inuit ways of life and of knowing (Bennet & Rowley 2004), and allows respondents to share personal experiences without breaking cultural rules related to confidentiality, gossip or humility. Indigenous scholars, Kovach (2009)
and Wilson (2008), have underscored the importance of ‘story’ in a research setting. In a study of determinants of health for Inuit women in Nunavut, participants drew upon examples from the community and used stories to illustrate points about important health issues, such as teenage pregnancy and custom adoption. These stories illustrated aspects of the broader health context involving the community and society relating to education and cultural identity (Healey 2006b; Healey & Meadows 2008). Understanding this approach for sharing knowledge allows for greater insight into the data and greater understanding of the meaning of the stories. Although some knowledge or practices may be disappearing, the use of stories to effectively communicate information remains part of Inuit life. It is for this reason that the recognition of the power of story is particularly important in the context of Inuit communities.

In relational epistemology, stories are shared, not collected. Interviews are conversations conducted in a natural, comfortable setting. In our work, we share a tea or coffee over a conversation. Parents may (and often do) bring their children with them. Over the course of the conversation, knowledge and experiences are shared in a common space. For example, in a study exploring the perspectives of parents on discussing a particular health topic with their teenaged children, I (Healey) shared personal experiences about my own family and raising my children, discussed resources related to the health topic, such as local people who can provide support, and the resources available to parents to facilitate conversations with their teenaged children about a health topic. This was part of the conversation and relationship-building process, and enhanced both my own experience and that of participants/collaborators while enriching the dialogue on the particular health topic being discussed. The researcher’s willingness to listen, quietly and carefully, without interrupting the story-teller, is vital; listening is in itself a critical skill that many researchers need to develop and practice.

Reflection on how stories are presented.

Ideally, stories are presented in their entirety. The presentation of the entire story allows the reader or listener to derive the messages that are relevant to that individual. Kovach (2009) shares her experience struggling with the presentation of findings in an Indigenous research perspective. She discusses her need to present the findings in two different ways:

1. one in which she associates most closely with the Indigenous methods perspective and includes the presentation of the entire story exchanged between the researcher and the research participant; and
2. a coding and thematic bundling of ideas with which she associates a more Western style of data presentation.

In the latter case, she shares her need to present the data this way to make it accessible to the academy, but feels that this contravenes with the intent of her work (and the intent of her ancestors) (Kovach 2009: 53) by extracting experiences from the contexts of their stories. Balancing the need to articulate a point in a small allotment of text space (in the case of a journal article or presentation) and the need to be respectful of the story in its entirety, is difficult to negotiate. It is our perspective that acknowledging this challenge in the presentation of findings is part of honouring the sections of the story that are omitted for the sake of time or space.
Reflections on our own interviewing experience.

Stories can be shared and told by an individual or they can be created over the course of conversation by a group of people. A dialogue about a topic is shaped by collective story-telling. When interviewing, I (Healey) am often engaged in a dialogue with the person or people with whom I am speaking. Since I am usually making contributions to the conversation, an important step in the exploration of the dialogue is to reflect upon my own story and experiences in relation to the topic(s) discussed. Articulating how my story and experiences may have shaped or in some way contributed to the conversation, allows me to tease out the experiences that are unique to the people who shared them.

*Iqqaumaqatigiinniq*

*Iqqaumaqatigiinniq* is the Inuit concept of all thoughts, or all knowing, coming into one. It is often referred to as part of the holistic Indigenous worldview.

Finding meaning and understanding.

The goal of data analysis is to find meaning and understanding in the stories, to return to the research question and to examine the data in the context that was set at the beginning of the study. In order to accomplish this, often a multi-stage process is needed, such as those described by Creswell (Creswell 2003). Thinking about and analysing dialogue at the time of the conversation with a participant or collaborator is part of the process, therefore, some meaning-making occurs immediately in the moment of the conversation. After transcription, transcripts are read and re-read several times and reflected upon. The recordings of interviews or conversations are listened to and transcripts are re-read to ensure that transcription is verbatim and to fill in any missing words. After a period of time immersed in the words and stories, ideas may start to form or crystallize (Borkan 1999; Healey & Meadows 2008). Discussing these ideas with others, colleagues, collaborators, or participants, is a critical part of the analysis at this phase, from a relational perspective (Kovach 2009; Wilson 2008). How are these ideas coming together? What do they offer to the Inuit community? What do they offer to the community of colleagues, collaborators, partners and participants? Placing the ideas in the context of the literature, the experiences of others and the experiences of the community is part of finding meaning and understanding.

*Pittiarniq*

*Pittiarniq* is the Inuit concept of ‘being good’, which can mean being ‘good’ in a philosophical and moral sense, and also in terms of action ‘good behaviour’ (for example, in the behaviour of children). The historical context of health research in Nunavut is complex. Different communities have had varying experiences with researchers coming to the north from the south. For decades, researchers have come and gone from Nunavut to conduct their research and then leave. Some had good intentions, some were ignorant of their intentions. Some developed relationships with Inuit, others conducted experiments on Inuit (Emberley 2008; Wachowich, Awa, Katsak & Katsak 1999). That experience is not unique to Inuit, which is why significant efforts have been made in Canada and in other parts of the world to define how research is carried out with Indigenous peoples, and how to create an ethical space in this context. A number of documents have been developed to guide researchers in their work with Indigenous peoples in Canada, including the Tri-Council Policy Statement, with special reference to Aboriginal Canadians, and the previously used document from the Canadian Institutes for Health
In the Western research model, ethics are grounded in the philosophical ideas of right and wrong, good and evil. Research ethics have their root in the post-World War II, Nuremburg trials, where medical researchers were held accountable for the medical experiments that they conducted on prisoners of war. Research ethics have been reactive; created in response to those who have used their power over others to do harm primarily in the context of medical experiments conducted during World War II (WMA 1964). Five of the enduring principles of research ethics are beneficence, non-maleficence, truth/justice, dignity and autonomy. Since that time, ethical frameworks have been developed to further identify particular sub-categories of ethical behaviour from the perspective of different populations, for example, vulnerable populations, Indigenous populations, women, and children.

In 2006, we began a project to explore how ‘ethics’ had been typically conveyed in Inuktitut in previous research studies. At the same time, we wanted to learn from Nunavut community members what they perceived to be ethical conduct in research. In discussions with different community members from across Nunavut, there have been three Inuktitut terms that have been highlighted. The first, shared by McGrath (2004), is Pittiaq-, which is related to ‘being good, kind or well; doing good or rightly’. McGrath (2004) argues that the term Pittiaq- refers to both technical and moral excellence. Without knowledge or experience of Inuit societal values, researchers from outside of the culture and epistemology often interpret doing/being good (ethics) based on their own worldviews and assumptions about what ‘good’ is. While well-intended, those decisions can have a range of negative impacts on their particular research participants or even on Inuit society in general (Janet Tamalik McGrath 2004). The second term, shared by another community member who declined to be named, is inuuqatigiittiarniq, which, as mentioned earlier, is related to the concept of being respectful of others. Thirdly, pittiajusuringgirmiq uulijalimanik is the remaining Inuktitut term shared by Shirley Tagalik of Arviat, NU (Tagalik 2013). Inherent in this term is the belief that there is a power greater than oneself that operates in the world. It was regarded as folly to try to set oneself up above others or in dominance of the natural world or environment. Being humble and respectful of the rights of all things helped Inuit to maintain a balance in their relationships (Tagalik 2013). All of the terms refer to behaviour; that one’s actions are reflective of one’s intention to ‘do good’. In doing so, one will be respectful of other people, the land, and the relationships between and among the facets of the research. Above all, participant-collaborators must be treated with respect, appreciation and dignity.

Consent.

In research, consent is typically sought in writing. Newer and more responsive means of ensuring that a participant-collaborator is informed include the use of video to demonstrate procedures or sample collection, or capturing the verbal explanation of the project and consent on audio recorder. The language in which the project is explained is very important. Consent information should be presented in English, Inuktitut and/or Inuinnaqtun depending on the language preference of the participant or collaborator.

The protection of the stories.

The sensitive and private nature of the experiences shared in health research studies underscores the fact that the protection of these stories is of critical importance. Considerations for protecting the story include: presenting the story in a way that honours the story-teller; articulating the intention of the story-
teller when they shared the story; articulating the context in which it was shared; respecting whether or not they want it shared with others and, if so, in what context; whether the story-teller wants to be identified with their story or whether they want their identity kept confidential; and reflecting on how might the story be (mis)used in the future.

Accountability.

From a relational perspective, accountability is part of the process of developing or building on relationships with each participant. The relationship is what holds us accountable. Kovach (2009) shares that, for Indigenous researchers, there are often three audiences with whom we engage for transferring the knowledge of our research:

1. Findings from Indigenous research must make sense to the general Indigenous community.
2. Schema for arriving at our findings must be clearly articulated to the non-indigenous academy.
3. Both the means for arriving at the findings, and the findings themselves, must resonate with other Indigenous researchers, who are in the best position to evaluate the research.

Researcher responsiveness and openness (Morse, Barrett, Mayan, Olson & Spiers 2002), methodological coherence (Eakin 2003; Morse et al. 2002; Morse, Swanson & Kuzel 2001), and reflection upon intentions and relationships (Gearheard & Shirley 2007; ITK & NRI 2007; Meadows, Verdi & Crabtree 2003; Morse et al 2002) are all aspects of accountability in relational research.

The Piliriqatigiinniq Model for Community Health Research.

Piliriqatigiinniq is the concept for working in a collaborative way for the common good. The Qaujigiartiit³ Health Research Centre has developed a model for how research should be conducted, both within the centre and by the researchers with whom the centre engages. Qaujigiartiit developed the Piliriqatigiinniq Partnership Model for Community Health Research in the formative years of the centre (Healey 2008). This model was developed in response to the community-identified need for health research that explores topics of concern to Nunavummiut and is collected, analysed and disseminated in a holistic and collaborative way. The Piliriqatigiinniq model is a visual representation of the web of relationships that we have with each other and is built upon the principle that anyone can be involved in health research in some capacity if we are all working for the common good. Multi-disciplinary collaboration strengthens research projects, enriches data analysis with additional perspectives, and fosters a greater sharing of knowledge and implementation of findings across sectors. While there may not be a representative from every sector involved in every project, the model serves as a reminder to look beyond the scope of what is commonly defined as ‘health’ and ‘research’ to include knowledge-holders and stakeholders from other disciplines and walks of life. This model was developed to provide practical organizational and methodological guidance, however, the foundations run much deeper.

---

³ ‘Qaujigiartiit’ is the Inuktitut word for ‘looking for knowledge’.

ISSN: ISSN 1837-0144 © International Journal of Critical Indigenous Studies
The model originated from a dialogue about health and the history of health research in Nunavut communities. It was derived from the stories and voices of people across Nunavut who attended community engagement sessions held between 2006 and 2008 (Healey 2006a, 2006c, 2007, 2008). While the model originated from a health perspective, the underlying principle is cross-cutting and interdisciplinary. The model is structured on the relational aspects of life in Nunavut communities—the relationships that are shared are the foundation from which we move forward to achieve wellness. Those relationships can be with anyone from any walk of life and with anything from any environment. The knowledge that is shared and created in this space is helpful for everyone. The motivations with which one engages in the project are the same—coming together for the common good and the betterment of health and wellness. The group is accountable to each other, to the relationships they have formed and/or will form together, and the relationships they have with others in their community. In essence, this is a model for an Inuit epistemology in action because it arises from the relational perspective and is built on what was known, what is known, and what will come to be known in Inuit communities. Its development is predicated on the past, present and future experiences of Nunavummiut.4

4 ‘Nunavummiut’ is the Inuktitut word for ‘People of Nunavut’.

Figure 1 The Piliríqatiqitiinniq Partnership Model for Community Health Research
From this epistemological perspective, ethics, accountability, methodology, knowledge, understanding and our relationships with each other as human beings, as well as our environments are part of the same space. This is, in our opinion, the essence of an Inuit epistemological perspective.

The Qaujigiartiit Health Research Centre promotes the idea that research must be used as a tool for action—that when one understands the scope and breadth of the issue, one is better-equipped to move forward and take action on it. Multi-sectoral collaboration strengthens research projects, contributes added perspective to data analysis and contributes to greater dissemination and implementation of findings across sectors. Therefore, this approach can be considered to be one that promotes active engagement, the sharing of knowledge, advocacy and action.

It is particularly important in Inuit communities that research projects be collaborative and inclusive. The historical context of research in the north, including harmful and unethical research practices, have led to an environment of mistrust and displeasure with researchers in many communities (Healey 2006a, 2006c, 2007, 2008). When we lead our own research projects, we are able to focus on answering our own questions and incorporate methods that are reflective of what we know about wellness and how we know it. This view underscores the right of colonized, Indigenous peoples to construct knowledge in accordance with the self-determined definitions of what they want to know and how they want to know it.

Conclusion

It is our belief that health research should answer the questions of the people and that such research should be collaborative. We also recognize that not all projects can incorporate the methods outlined in this paper and variations exist depending on the approach incorporated in any given project. With this paper, it has been our intention to share epistemological considerations for northern community health researchers. This paper is a beginning of a dialogue and we look forward to engagement with the expansion of this literature in the future.

References


Canadian Institutes of Health Research (CIHR). 2006. Ethical Guidelines for Health Research with Aboriginal Peoples. Ottawa, Canada: Canadian Institutes of Health Research.


Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Subjects (1964).


