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# Wiisokotaatiwin: Kettlebell Training, Critical Dialogue, and Creating Well-Being Through Physical Activity

In response to the persistence of health disparities, the field of Indigenous health research has begun to focus on Indigenous Peoples' perspectives as a focal point to learn novel and meaningful ways to address health disparities (Ahenakew 2011; Tobias et al. 2013). Further, Indigenous health researchers have argued that for Indigenous Peoples' health disparities to improve, a concerted focus on Indigenous Knowledge of health and wellbeing must occur (Ahenakew 2011; Loppie Reading and Wein 2009; Reading 2009), particularly in the realm of physical activity (Lavallée 2008). This chapter showcases the results of a unique and Indigenousdriven research study, Wiisokotaatiwin. The urban Indigenous women were brought together to engage in consciousness-raising and physical activity through an Indigenous research methodology, Wiisokotaatiwin. First, I briefly position the literature on Indigenous women's experiences with participating in physical activity to demonstrate that their perspectives on colonization, decolonization, and addressing health and wellbeing are needed. Second, I describe Wiisokotaatiwin and where I learned this meaningful Anishinaabe word, which leads me to discuss the partnerships that allowed me to fulfil this research. Third, I describe Wiisokotaatiwin as a research method, the main research questions, and the recruitment of women, as well as present the data analysis and ethical considerations. Fourth, I present the results of Wiisokotaatiwin in a cyclical way that includes the three key convergences of colonial displacement, critical consciousness of marginalization, and regenerating wellness by enacting a sense of community. Fifth, I discuss the relevance of these research findings and the specific limitations, and conclude the chapter.

Although there is a growing body of literature that has focused on the experiences of Indigenous youth with physical activity (Johnston Research, Inc. 2011; McHugh 2011), non-Indigenous female youth and physical activity (Forneris et al. 2013; Pfaeffli and Gibbons 2010), and adult non-Indigenous women's experiences of physical activity (Castelnuovo and Guthrie 1998; McDermott 1996, 2000), much less is known about Indigenous women's participation in physical activity, especially in urban settings. More specifically, there are very few studies where authors have sought knowledge directly from Indigenous women regarding their physical activity in an urban setting, with the exception of Lavallée's (2008) notable study that focused on the impacts of martial arts training on the well-being of Indigenous women in Toronto. Her study aimed to determine if Indigenous women's involvement in physical activity had an impact on their holistic well-being. The Indigenous women who participated in her study reported that physical activity fostered a sense of belonging and community that assisted in the reclamation of their identities as Indigenous women.

Lavallée's (2008) findings resonate with Thompson et al.'s (2003) study that focused on urban and rural Native American women's experiences of physical activity. Thompson et al. (2003) found that social support was an important factor for participation in physical activity. The authors described social support as knowing other people within the family/social network who exercised and seeing people in their neighbourhoods exercise. The authors suggested that "social support for Native American women is a critical factor that should not be ignored when physical activity programs are being developed" (Thompson et al. 2003, p. 59), and they emphasized the need for physical activity opportunities designed specifically for Indigenous women. Connecting individual well-being to overall community well-being is another important aspect of Indigenous women's participation in physical activity.

A study with primarily Choctaw women who participated in Yappalli, which is a recreation/memorial walk of their ancestral forced removal routes, demonstrated that their individual well-being is linked to the broader health of their community (Schultz et al. 2016, p. 27). Indeed, the authors noted that "many Indigenous approaches [to physical health practices] tend to see individuals as components of the whole with obligations to give, teach, or share with community. In many Native communities, individual experience is inextricably linked to the collective" (p. 27). Together, Lavallée's (2008), Thompson et al.'s (2003), and Schultz et al.'s (2016) research has shown that for Indigenous women, participation in physical activity is interconnected with social support and community.

The role of community and physical activity in generating well-being has been the topic of a few recent studies. McHugh et al. (2015) sought to better understand how urban Indigenous Peoples conceptualize community, specifically within the sport and physical activity realm. The study highlighted that for urban Indigenous Peoples "sport is community" (p. 82) where one can connect, build friendships, and enhance belonging, which shows the importance of physical activity to foster a sense of community. Further, Howell et al. (2016) study showed the significance of urban Indigenous Peoples coming together in a series of health circles to discuss their health and well-being, while simultaneously fostering a sense of community. The women, who were urban Indigenous community members in Vancouver, reported that attending the health circles generated an improvement in their holistic health. While the study focused on the importance of physical activity, it did not include a concerted application of physical activity. Another study, which took place in two Anishinaabeg communities in Ontario and interviewed local Elders (men and women) to determine strategies for environmental repossession, found that the development of culturally relevant, communitybased exercise programmes is an important strategy for improving Indigenous Peoples' physical health and well-being (Tobias and Richmond 2016).

In sum, while there is some literature concerning physical activity and urban Indigenous Peoples, particularly concerning the importance of community settings, little is known about the perspectives of urban Indigenous women on colonization, decolonization, and specific ways to address health and well-being, while simultaneously engaging in directed physical activity. Thus, I implemented a research project using an Anishinaabeg methodological framework to better understand Indigenous women's perspectives concerning their health and physical activity. The research aimed to explore how directed physical activity, coupled with critical dialogues regarding colonization, decolonization, health and wellbeing, ancestral stories, and other aspects of physical activity, can influence urban Indigenous women.

# Wiisokotaatiwin: Anishinaabe Knowledge Learned Through Language

Wiisokotaatiwin, as an Anishinaabe research methodology, has been in development for quite some time. As part of my earlier research (2006–2009), I engaged in interviews with Anishinaabeg Elders to better understand the teachings of the ogitchitaakwe (an Anishinaabe woman who helps her people). By learning from my Elders, I showed that an important element to become an ogitchitaakwe was to engage in critical dialogues to foster personal decolonization through gathering for a purpose, or Wiisokotaatiwin (McGuire-Adams 2009). As part of this earlier work, Wiisokotaatiwin was informed by bell hooks' (2000) vision of consciousness-raising groups and Freire's (2000) promotion of critical dialogue. Freire (2000) explained that dialogue is key to transformation or praxis, which necessitates critical dialogue about our realities with the goal to ultimately transform them. Similarly, hooks (2000) showed how critical consciousness is a necessary element required to engage in personal transformation, with a special focus on bringing women together to engage in feminist consciousness-raising. To foster an Anishinaabeg understanding of consciousness-raising groups, Anishinaabemowin speaker to help me learn an Anishinaabemowin concept that connects with an Anishinaabe perspective of consciousnessraising groups, which is where I first learned of and applied the term Wiisokotaatiwin.

My relationship with Naicatchewenin First Nation, described in Chap. 3, includes a long-standing relationship with Gary Smith, an Anishinaabe Language Holder and Knowledge Keeper from Naicatchewenin First Nation, located in Treaty 3 Territory. Through this relationship, among others, I can learn about Anishinaabemowin (language) concepts to connect to core concepts from an Anishinaabe perspective, rather than solely relying on Western-derived concepts to inform my research. As I am not fluent in Anishinaabemowin, the result of the effects of colonization on my family, which includes residential schools, it is important for me to connect with people whom I trust to guide my language revitalization. During my earlier work, I sought to connect to an Anishinaabe perspective on consciousness-raising groups, which is how I first learned of the term Wiisokotaatiwin. I have continued my learning of this incredibly meaningful term for my current Anishinaabe research process, which I explain in this chapter. My long-standing connection to Naicatchewenin First Nation fostered my growth as an Anishinaabe researcher, and as a result, we have co-developed a separate programme of research from this book that connects to Anishinaabeg understandings of the land and women Elders' knowledge about healing to foster the regeneration of Anishinaabeg health and well-being. I mention our co-developed programme of research here to signal the importance of my connection to Naicatchewenin First Nation and my reciprocal relationship to them for offering me their continual guidance in Anishinaabemowin and core conceptual understandings.

Using hooks (2000) and Freire (2000) within my early development of Wiisokotaatiwin demonstrates how Anishinaabeg and other Indigenous researchers are skilled at integrating multiple streams of knowledge and adapting theory that is developed in other fields (Absolon 2011; Wilson 2008). Wilson (2008) explained that while Indigenous researchers may look to other theories or methods for support, "this support is not for external validation but rather as a complementary framework for accepting the uniqueness of an Indigenous research paradigm" (p. 16). Absolon (2011) further clarified that as Anishinaabeg traverse academia, we are "both Anishinaabeg and scholars. One does not exclude the other" (p. 112). As Indigenous researchers, we ground our research in our respective knowledge and teachings, but we also learn from and are informed

by other scholars. Moreover, the holistic nature of Indigenous methodologies, which encompass many different perspectives, means that they "must therefore be pluralistic, eclectic, and flexible. They need to reflect the many facets of our existence today, while reflecting the cultural integrity of our ancestors" (Absolon 2011, p. 120).

Wiisokotaatiwin is both an Indigenous research methodology and an applied research method. To advance the development of Wiisokotaatiwin from my master's work to the research presented in this chapter, I used the tenets of Indigenous research methodologies, which include processes of decolonization, using Indigenous narratives and worldviews, and practicing relational accountability to the research women and/or Indigenous community (Kovach 2009; Rigney 1999; Smith 2012; Wilson 2008). Importantly, Wilson (2008) emphasized that Indigenous Peoples can develop methodologies, and corresponding research methods, that follow "our codes of conduct, and honours our systems of knowledge and worldviews. Research by and for Indigenous people is a ceremony that brings relationships together" (p. 8). Further, I agree with Wilson (2008) when he emphasized that Indigenous words contain huge amounts of information "encoded like a ZIP file within them" (p. 13). Wiisokotaatiwin is such a word. While I applied Wiisokotaatiwin as an Indigenous research methodology within the broader Anishinaabeg research paradigm (McGuire-Adams 2020), I sought to implement it as a research method or tool. Wiisokotaatiwin, as an Indigenous methodology, uses gikendaasowin and decolonization as an approach to conduct my research. As a research method, Wiisokotaatiwin is a tool to gather knowledge; therefore, the methodology and research method are inherently linked. By using Indigenous methodologies and tools in research, as Indigenous scholars "we re-write and we re-story ourselves" (Absolon 2011, p. 21) by using our ways of research to produce knowledge. Thus, I applied my learning of Wiisokotaatiwin as a research method to explore the results of directed physical activity, coupled with critical dialogue, among urban Indigenous women. This type of epistemic knowledge is recognized as a valuable way that Indigenous Peoples contribute to learning from our specific ontologies where Indigenous language concepts offer a way to express a process for living a good life (Bouvier et al. 2016). To this end, Gilbert, one of the Elders who participated in our sharing circle explained

in Chap. 3, shared that Wiisokotaatiwin is coming together to help each other and that using our language is important to ensure it comes back strong (Elders' Sharing Circle, 2016). The sentiment of "coming back strong" that Gilbert mentions reflects the efforts of the colonial government to erase our identities through forced assimilation, which occurred in residential schools and forcibly prevented children from speaking Anishinaabemowin. Thus, using Anishinaabemowin is always an act of regeneration from the effects of settler-colonial erasure.

## Relationships

This chapter disseminates the results of a research project that I conducted with urban Indigenous women through my meaningful connection with the urban Indigenous community in Ottawa for seven years at the Odawa Native Friendship Centre.

The Odawa Native Friendship Centre is a non-profit organization that delivers a wide spectrum of programmes and services to Indigenous Peoples living in the Ottawa region. The Centre represents a community-based and directed Indigenous organization that serves the interests of urban Indigenous Peoples, inclusive of First Nations, Métis, Inuit, and non-status peoples, in the areas of social, cultural, recreational, economic, and community development.

Prior to starting the research, I had a pre-existing, six-year relationship with the Centre through their Urban Aboriginal Healthy Living Program (herein referred to UAHLP). Between 2010–2017 and 2019 to present, I led a volunteer-driven kettlebell training programme as part of the Centre's regular monthly schedule. As a result of our long-standing, respectful, and reciprocal relationship, the Centre agreed to let me use their physical activity space for this research and assisted with participant recruitment (detailed below). To maintain our reciprocal relationship, I invited the Centre to use the results of my research to assist with creating new physical activities or other specialized programming in the future.

## **Objectives and Research Questions**

The objectives of Wiisokotaatiwin in this study were two-fold: bring urban Indigenous women together to discuss research questions concerning Indigenous women's physical activity and well-being, colonization, and decolonization, and determine if or how directed physical activity can influence critical dialogues regarding health and well-being. Wiisokotaatiwin, thus, entailed meeting for approximately two hours per week over seven weeks from October 16, 2016, to November 27, 2016. During each session, I would lead and participate in a kettlebell workout. Immediately after, we would meet in a circle in the same physical activity space that we had worked out in to share a healthy snack that I had prepared and engage in a critical dialogue about the research questions. The workout lasted between 40 and 45 minutes and the dialogue lasted between 60 and 75 minutes.

Based on the gaps in the literature regarding Indigenous women's perceptions of their physical activity and decolonization, I developed a list of guiding research/discussion questions for each of the seven sessions, which I emailed to the women in the first week. These questions included the following: (1) What do you think about physical activity, and is it important to you? (2) Do you know of any ancestral or current (family or community) stories of women being physically strong? (3) In thinking about your own experiences, how does colonialism impact you, especially regarding health and well-being? (4) Have you thought about personal decolonization, if so, what does it mean to you? (5) How has your participation in Wiisokotaatiwin affected you? While the research/discussion questions guided the sessions, open discussions were important to foster critical dialogues; the women were free to discuss other topics that they felt were important, and in this way, the women had control over the dialogue.

Importantly, the dialogue portion aligns with a research-sharing circle approach, as described by Kovach (2009), where women "share their stories in relation to the research question" (p. 125). Thus, through the dialogue portion of Wiisokotaatiwin, each participant had the ability to share and to engage in their own storytelling. This process created a

meaningful iterative space where each participant listened and reflected on what was shared, to then add to the dialogue.

I chose kettlebell as the physical activity because I am a certified kettlebell instructor who has been coaching Indigenous Peoples in kettlebell since 2009. Notably, kettlebells facilitate endurance, strength, explosiveness, flexibility, and a holistic approach to fitness (Lake and Lauder 2012); as such, they are great fitness tools to foster physicality in short amount of time (Manocchia et al. 2013). Having been a kettlebell coach for many years, I have observed how they are incredible tools to gain physical strength, which I have seen simultaneously foster overall wellbeing and confidence in class women.

## **Recruitment of Urban Indigenous Women**

The recruitment strategy for Wiisokotaatiwin included a poster advertisement placed at the UAHLP location and circulated through the UAHLP email distribution list and Facebook page. The criteria for participation included identifying as an Indigenous woman (i.e., First Nations, Métis, Inuit, non-status person who self-identified as a woman) aged 18 years or older and a willingness and ability to engage in research topics such as perceptions of colonization, decolonization, health and well-being, ancestral stories, and other aspects of physical activity. No prior experience with kettlebell training was required. There was an immediate community response to the recruitment poster; in fact, there were over 20 inquiries within the first few days of recruitment. Due to space limitations, only 12 women were invited to participate in the study on a firstcome, first-served basis (refer to Table 6.1 for women's names, ages, and community affiliations). The Wiisokotaatiwin dialogue sessions (not including the kettlebell training portion) were audio recorded, and each participant signed a consent form approved by the research ethics board at the University of Ottawa and received an honorarium of \$70 each, or \$10/session. Importantly, I gave a semma (tobacco) offering to each participant upon the commencement of Wiisokotaatiwin. Offering semma is a common practice among many Indigenous Nations; offering it is a respectful way to ask people for their permission or guidance. Upon

Name	Age	Indigenous community affiliation
Julia	Not provided	Anishinaabe, M'Chigeeng First Nation
Rosalie	35	Nakota Sioux
Andrea	Not provided	Algonquin
Donna	57	Algonquin, Kitigan Zibi First Nation
Sarah	36	Algonquin, Pikwàkanagàn First Nation
Kelly	29	Anishinaabe, Nipissing First Nation
Brandi-Lee	31	Anishinaabe, Nipissing First Nation
Alexia	43	Inuit (Nunavut Beneficiary)
Sherry	53	Mi'gmaq, Listuguj First Nation
Tracy	Not provided	Cree, Cowessess First Nation
Laura	Not provided	Cree, Opaskwayak Cree Nation
Shirley	57	Algonquin, Kitigan Zibi First Nation

Table 6.1 Wiisokotaatiwin women's names, ages, and community affiliations

being offered the semma, a person may choose to accept the tobacco or not. Offering tobacco is also a demonstration of reciprocity and accountability between researcher and participant where good intentions and respectful engagement is paramount (Pedri-Spade 2016). The women who were present in this session accepted the tobacco offering.

Importantly, Wiisokotaatiwin is not a standard qualitative focus group where the researcher directs the questions. Instead, I was an equal participant in the dialogues (Wilson 2008). More specifically, as Anishinaabekwe scholar Pedri-Spade (2016) explained, it is imperative for an Anishinaabe researcher to "share as an equal, and to have [our] personal reflections ... be part of the conversations during [the research]" (p. 396). As a result, all women, including me, equally contributed to Wiisokotaatiwin.

# **Analysis and Ethical Considerations**

Each dialogue session that was part of Wiisokotaatiwin was transcribed verbatim and returned in a password-protected email for each of the women to review after the final session. Although I asked each participant to review the transcripts, only 5 of 12 women replied to the email. Of the five who responded, only two requested minor edits related to spelling. Once finalized, the transcripts were exported into QSR International NVivo 10.2 (for Mac), which is a qualitative data analysis

programme. I followed the same Indigenized analysis process that I described in Chap. 5. The final manuscript was given back to all the women for review. It was important for me to engage in this reciprocal act to ensure that the words of the women were analysed in a good way and with their approval. It was important for me to seek approval from the women with how I articulated the themes of the research, but more importantly, I wanted to be sure I used their quotes in ways they approved. Also, verifying my interpretation of women's stories with them is a significant enactment of reciprocity and inaadiziwin within my research. The urban Indigenous women who participated in this study emphatically supported the research by giving their consent to be involved, by reviewing their interview transcripts, and in providing their review and approval of the final article, where there were no disapprovals.

## **Results**

To make meaning of the Wiisokotaatiwin results, I present them as a circle that has three convergences: the start of the circle (colonial displacement), the circle continued (critical consciousness of marginalization), and closing the circle (regenerating wellness through enacting community). At the start of the circle, the women spoke about the fortitude and well-being that their grandmothers gained from their relationships with the land. Their relationship to the land was disrupted through colonial displacement, which created a parallel displacement of Indigenous women's physicality. As we continued to journey within the circle, the women shared how colonial displacement from the land disrupted Indigenous women's well-being and health, vastly impacting self-confidence and furthering marginalization. To complete the circle, the women showed how physical activity, coupled with critical dialogue about our colonization, health, well-being, and decolonization, fosters a return to well-being, strength, and wellness.

## The Start of the Circle: Colonial Displacement

Many of the women reflected on their grandmothers' or great-grandmothers' tenacity and strength and how it was garnered from their connection to the land. For instance, Shirley recalled that her great-grandmother had an enduring strength that was gained as the result of raising three of her great-grandchildren, tending to farm animals, preparing daily home-cooked meals, preparing game by skinning and processing the meat, and making clothing. Shirley reflected on her grandmother's strength and skills: "There was nothing she could not do; it was just amazing ... to me, there aren't that many women like that. I haven't met that many women like that ever again." Similarly, Rosalie reflected on her grandma's daily tenacity for getting up at 6 a.m. to then work all day until the sun went down, but how these traits are not seen today:

My grandmother [used to] trap until she was 70, because she was built strong and was naturally tough. It was second nature to her because that's what her grandmothers had done prior to her time. It's kind of like that's how it always was for our women. It's just some of the women that grew up in cities, they don't really have that strength, that attitude. It's more like the traditional women who utilize their territory were that way.

The transition from living off the land to urban living was also shared by Sherry, who grew up on the land in Listugui First Nation:

I'm 53 and I remember [as a child] pulling a net in the mud with all these salmon on it to help our father. I grew up on the land. I gutted animals. I killed my own moose years ago. I know how to gut a moose ... just to feel my hands inside the moose. You wouldn't believe the feeling you get; he survived to help me survive. It's a way of survival. I always say that, because it is a way of survival. We need those tools. Now we all live in the city. Look at this. Right there we have a cell phone, "beep, beep, beep. I want a pizza please," and that's where I think we lose our identities.

Sherry shared that she still lives off the land as much as she can; she raises chickens and turkeys and has a big garden, and it is important to

her to practise her spirituality (e.g., smudging and offering tobacco). Upon reflecting on Sherry's story, Rosalie added:

We don't have the traditional consciousness anymore. Well some people have it, those that practice [it] everyday, like you were saying [motioning to Sherry], but I think the millennial age, they lost that traditional consciousness, [that is] what's missing in finding that consciousness and I think that's what needs to be focused on.

Shirley, Sherry, and Rosalie all raised their concerns about the transition from land-based activities to urban environments. Their stories suggest that Indigenous women's displacement from the land signalled a parallel displacement of Indigenous women's physicality and determination. The women articulated that there have been lasting effects on Indigenous women's well-being and physical strength due to their displacement from land-based living to more colonial-based lifestyles.

# The Circle Continued: Critical Consciousness of Marginalization

In one of the Wiisokotaatiwin sessions, I provided the women with an overview of the health disparity literature regarding Indigenous women's ill health. The women then had the opportunity to reflect upon the health disparity literature that positions Indigenous women as prevalently ill when compared to non-Indigenous People. Tracy shared that she saw the disparity literature as a baseline:

This is where we are right now. I mean, the numbers aren't lying, right? We do know that there's obesity and it's all linked to colonial order; it's all linked to poverty. Those are our numbers, and those are the things we have to deal with. That's what the data tells us. Groups like this, and leaders in our community ... will help lift us out of that, and I think it just keeps going and going, and if we bring people to get away from that baseline data.

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Julia explained that she "doesn't like the implication in the text that we're not healthy. I think we all have the potential to be healthy, but at times our bod[ies] are seen as bad, intrinsically diseased or weak." Tracy also considered how marginalization is connected to the disparity literature:

I think that some of the [health] limitations that we were talking about ... I think we talked about physical limitations and economical limitations of Indigenous women being in the margins, but I think it goes deeper than that. We are also marginalized in our own heads, so you stop and you say, "Oh, I can't do this." We've been in the margins for so long that this is where we're used to being, and it affects our self-confidence, and our ability to think that we can actually do something.

Julia agreed with Tracy and reflected on how racism and stereotypes affects Indigenous women:

I agree. I grew up in the city, and I often think about my experiences growing up. For example, when you're one of the few Aboriginal people at school it's always like, "Oh we don't want her on our team." You're always experiencing these negative things coming toward you from different directions. Teachers didn't think you had the same capacity as other people and that still happens today. So, you experience that, and then it doesn't get better in high school maybe you want to try out for a team, and maybe not having the skills. You aren't comfortable being around your basic environment that other people were comfortable being in. That keeps coming back, and later on you begin to apply this to other aspects of your life, [such as] going to the gym [and feeling] embarrassed or [wondering] are people still looking at me? It's hard to navigate new environments when you're faced with subtle racism and stereotypes that impacts your health mentally, emotionally, and social life. It impacts your ability to want to fulfill your goals.

Kelly provided another account of the marginalization she experienced because of choosing to live a healthy lifestyle:

In my work, it's [part of] my job to be that [healthy] role model, but I get made fun of a lot for what I eat or what I don't eat. If I'm seen eating a slice of pizza it's like, "oh no Kelly's eating pizza." I'm like "what do you mean? Pizza is my favorite." So, it's kind of the opposite end where if you're trying to eat healthy or you're seen as trying to stand out as the good one outside of everyone else who are eating bad, or what they perceive as bad. And [it is the] same with fitness too, people in the community who are exercising a lot or being really active they are often like, "oh they are always out at the gym and not with their family" and when we go back home it's always in our plan to go to the gym and it's what we do on our off time, but for them it's like "oh well you don't want to hang out with us? You're only down here for a couple of days and you're going off to the gym," and it's like "yeah that's just part of our lifestyle."

Kelly's story shows that, at times, marginalization occurs in the very spaces where community support should exist. Brandi-Lee provides a further reflection upon this space that some Indigenous women navigate, "[In] Western culture versus ours, we always celebrated our strengths. And I think [because of] colonialism how hyper critical we have learned to become over so many things." Brandi-Lee also shared that she believes "[everyday] moments in [our] journeys should be celebrated" in addition to the bigger moments in our lives. The women emphasized how they are treated unequally, as seen through their experiences with marginalization and subtle racism. Their experiences showed that by continually being treated as unequal by discourses of colonial normativity, and prevalently ill in the case of the health disparity literature, Indigenous women are conditioned over time to become internally oppressed.

## Closing the Circle: Restoring Wellness by Enacting Community

The women reflected on their involvement in Wiisokotaatiwin and what it meant for them. They highlighted the importance of creating a community by gathering women together for physical activity. For instance,

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Brandi-Lee shared that she and Kelly had reflected on the space that Wiisokotaatiwin created:

I think it was helpful to come together as a group ... Kelly and I were talking about how great it was to be with a lot of likeminded people and just have that kind of communal sense again and all sharing that same goal. And realizing that we [all] shared so much ... there's so much in common with all of us and the things that we had to go through as Aboriginal women.

In particular, they found that their experiences as Indigenous women navigating various effects of colonialism resonated with other women. For instance, Alexia shared that she enjoyed coming together as a group to hear others' stories and further acknowledged that "we're all so diverse, but we all share this common dark part." Similarly, Sherry noted, "I think as women we connect easier with each other, especially as we're all First Nations. We all come from different communities, but we can connect somehow because we share [similar] stories of our ancestors."

Wiisokotaatiwin created enthusiasm for physical activity, which was highlighted by several women. Julia explained that she would attend workout classes at mainstream gyms, but there was never a community connection, which influenced her motivation:

You can go to workout classes but often if you don't make that connection with other people in class then it's not as motivating to go. So, I really like the fact that we had the workout together, then we had the sharing. [It] made it more motivating to come here.

Similarly, Alexia noted in our group dialogue that she had been working out at the gym and running as a result of attending Wiisokotaatiwin. She explained:

[I feel] a boost in my confidence to start working out again. I always feel good when I leave here. I've been trying to come to the gym every day, at least for half an hour ... [and when I first started] I could run for 20 minutes and now I can do 45 minutes.

The women also spoke about the importance of creating community spaces where women can come together. Julia explained that while Wiisokotaatiwin was a space to discuss physical health:

we [also] talked about our lives as women ... we do share things in common but everybody had these different perspectives so for me it helped [me to] look at things a different way and to get new ways of thinking about things.

### Brandi-Lee further explained:

It's so important to come together as a community to remind each other that it is possible. These limitations that we place on ourselves aren't ... sometimes they're just in our minds. The biggest take home for me would be mindset, and knowing it is possible to get where you want if that's your goal. Even just the changes in several weeks is amazing. For me, it got me on a kind of good start back into exercising more. Having a peer group, it just makes you more committed. You just want to be there and meet with your group. It kind of becomes your group after. Something you look forward to on Sundays.

Rosalie and Julia correspondingly reflected on how Wiisokotaatiwin provided them with a comfortable space to connect with other Indigenous women for physical activity, which further built their sense of community:

I never really worked out at all [in the past]. I always wanted too. I even bought a membership, but I cancelled it because I would just never go and I would never have that motivation. It needs to be community. And you need to feel comfortable. So, this also gave me a space to come and try to get healthy and be comfortable also. (Rosalie)

This felt like a body positive space. I like that I felt comfortable here. Sometimes I go to the gym and there'll be uber healthy people on those spinning classes and I'm just huffing and puffing away. So, this felt good. I felt comfortable. (Julia)

The supportive, comfortable, Indigenous women-led community that Wiisokotaatiwin provided enabled the women to gain confidence in other areas of their lives. Tracy noted:

I felt very proud of ... the group, and myself, because your part of something that is really strong—not just physically, but emotionally, spiritually, and mentally. You feel that strength just by doing physical stuff with people who are like-minded. [Additionally] I really love our group here because, where I work, it drains me. I come here and I'm able to take that confidence and that strength, and [apply it to] how I carry myself at work.

Having discussed the importance of community in fostering the broader health and well-being of Indigenous women, the women also discussed the issues they see with the lack of funding to promote wellness in a community. Kelly, who is employed at a local Indigenous health organization, brought attention to how funding usually goes towards chronic disease care and hardly any funding towards fostering health and well-being:

A lot of the funding goes to management programs for chronic diseases rather than prevention. So [my organization] gets very little in comparison to help live healthy lives, versus the management of diabetes for example ... I feel like that's backwards. It should be the other way around ... When we leave here, we feel really good, right? But how do you report on something like that? To [report] "we feel awesome! We should invest more here versus diabetes." We see so many people on insulin, and that's what paid more attention to because of these [disparity] statistics.

Tracy agreed with Kelly and reflected on how the needs of the people are not fitting current programmes:

Our needs, our aspirations are not fitting into their square mold, so that's when we need to shift things around and insist. Especially now, in the place that we're at with this government, we have to say "the way you operate your program doesn't work for me, so this is how we need to do it." I think taking ownership, and insisting that they start meeting our needs, not the funders' [needs]. That's the battle we have to take [on].

This led Kelly to question why there has not been more of a challenge to top-down funding directives, which then guided her to think about other community-led opportunities to address our health:

Why haven't we challenged it more, you know? Just to get that confidence to be able to do that—then potentially thinking about other sources of funds. Do we have to go through the government? I don't know. What other options are there? How can we mobilize as a community to do this work, or to do it [our] way? There's a lot of really positive things happening, like with kettlebells, and bringing that into a space like Wiisokotaatiwin. I think it's related back to workouts like this, that make you feel strong physically, that translate out there, and you begin to feel strong mentally. You can take that and bring it into those kinds of conversations that are tough to have, but you feel stronger as an Indigenous woman to be able to do that.

Through coming together for a purpose, the women explained that Wiisokotaatiwin fostered the development of a sense of community and promoted the women's self-confidence, which some connected to decolonization.

Many of the women also described how Wiisokotaatiwin helped them with acknowledging the role of decolonization in gaining confidence. For instance, Shirley recognized the importance of the multi-faceted discussions that occurred around decolonization:

I really enjoyed that [Wiisokotaatiwin] incorporated a lot of stuff. Our physical well-being, our emotional well-being ... and talking about the connection between us and decolonization. I think it empowered each one of us here in the room to acknowledge, "yes, [colonialism] happened, and now we're moving on." To see where we once were, where we are now, and where we're going in the future. So, I think that this [space] helped me to feel all of that.

Tracy agreed with Shirley and added that for her:

[Wiisokotaatiwin] affirmed and really clarified the whole connection between physical fitness and building strength in all elements of your body, to decolonization. I mean, I can see the real connection. The power I feel around this circle is just amazing and it makes me proud to be here.

The sharing that occurred between the women encouraged a level of comfort to discuss personal stories regarding how colonialism has affected them, envision programming where well-being is enhanced, and connect their well-being to decolonization.

# **Indigenous Women Creating Community Through Physical Activity**

Indigenous health researchers have noted that transformative ideas are needed from Indigenous community members themselves to address our health and well-being (Reading 2009), especially in relation to physical activity (Lavallée 2007; Rolleston et al. 2017). Thus, I implemented Wiisokotaatiwin to bring together urban Indigenous women to explore how directed physical activity, coupled with critical dialogues regarding colonization, decolonization, health, and well-being, may influence them. The results from the seven-week session of Wiisokotaatiwin emphasize that an Indigenous-led critical dialogue about health and wellness, coupled with directed physical activity, can serve as an important motivator for Indigenous women to engage in physical activity.

The women discussed the displacement from land-based living to colonial-based lifestyles. Specifically, Shirley, Rosalie, and Sherry noted how city-based living caused Indigenous Peoples to disconnect from their land-based lifestyles, which they saw as negatively affecting Indigenous women's physical strength and identities. This resonates with what many scholars have articulated concerning the devastating effects that Indigenous Peoples' displacement from their lands has had upon their health (Alfred 2005; Kelm 1998; Walters et al. 2011). For instance, Alfred (2005) explained that Indigenous Peoples' ill health is related to our "disconnect[ion] from our lands and from our traditional ways of life" (p. 31). While traditional ways of life are often assumed to occur in reserve-based settings, there have been other scholars who suggest that

Indigeneity is present regardless of urban or rural location (Bang et al. 2014) because Indigenous Peoples "carry [our attachments to lands] ... wherever we go" (Walters et al., p. 170). To only envision Indigenous Peoples as authentically existing in the past, however, "trap[s] Native people in a time warp, [that] insist[s] our past was all we have. No present. No future. And to believe in such a past is to be dead" (King 2003, p. 106). In our efforts to foster health and well-being, it is important to acknowledge that our existence is not solely enacted through land-based living. Without a doubt, regenerating our land-based activities is fundamental for our collective drive towards regenerating our respective governance systems and fostering decolonization (Alfred 2005; Coulthard 2014; Simpson 2014). I argue, however, that corresponding practices of decolonization can be enacted through physical activity that is mindfully connected to our ancestors' physicality.

The women spoke of the physical strength of their ancestors, which shows the importance of ancestral stories to assist Indigenous Peoples in "bridging the past and present" (Schultz et al. 2016, p. 27), and fostering health and well-being in an urban-based Indigenous community setting. Recently, Schultz et al. (2016) emphasized how Indigenous Peoples' commitment to physical activity and healthy living is a significant way to "reconnect to ancestral strength and visions of health" (p. 26), which also enacts our relational responsibilities to our ancestors and future generations. The qualities of tenacity, determination, and strength that the women expressed were traits of their grandmothers that are also present within them and can be enacted through physical activity. Thus, as we remember our ancestral stories of physical strength, rather than viewing them as tethered only to past ancestral practices, we can use the stories to propel us to engage in physical activity that replicates our ancestral strengths and enhances our relationships to our ancestors.

Moreover, as reported by the women, Wiisokotaatiwin created a community of women, through physical activity and critical dialogue, where they self-reported gaining holistic well-being such as feeling strong physically, emotionally, spiritually, and mentally, and having enhanced self-confidence. Correspondingly, as the weeks progressed, the women's participation in Wiisokotaatiwin helped to alleviate some of their daily experiences of marginalization. While physical wellness was the driving

force, the women shared that they felt good after each session of Wiisokotaatiwin, which relates to enhancing overall well-being. The women explained that they left Wiisokotaatiwin feeling good and were motivated to continue with their own physical activity. This motivation led some women to gain confidence in addressing other areas of marginalization, such as going to the gym or facing workplace or other criticisms. Lavallée and Lavallée and Poole (2010) explained that dispelling stereotypes and building confidence through physical activity enhances Indigenous health. The space that Wiisokotaatiwin created assisted the women to engage in self-reflection with other women, which was found to have reverberating effects on the women's overall well-being, as they reported feeling good after each session. This finding resonates with Lavallée's (2007) study where Indigenous women enhanced their holistic well-being through a martial arts programme.

The women showed a critical consciousness of marginalization, as seen through their lived experiences and the knowledge that they carried. When asked to reflect on the health disparity literature that positions Indigenous women as prevalently ill when compared to non-Indigenous People, the women connected it to the effects of colonialism and how it related to other experiences of marginalization. For instance, some of the women explained that they felt marginalized from mainstream society (e.g., in educational settings) and, in some cases, judged for leading active lifestyles. It is significant that the women spoke about the intricacies of marginalization and the internal oppression that they navigate, as colonialism is realized through everyday actions, in addition to structural forms of authority, such as is seen through the health disparity literature. Kelm (1998) discerned how the colonial government, the medical profession, and other colonial state partners are well versed in purposefully positioning Indigenous Peoples as weak, ill, and dying, which has worked to solidify "the embodiment of inequality [as] a powerful tool in legitimizing [colonial] authority" (p. xvii), especially over Indigenous bodies and territories. A more recent article (Hyett et al. 2019) further critiques the deficit approach that is replicated when non-Indigenous researchers study the health disparities between Indigenous and non-Indigenous Peoples. Hyett et al. (2019) challenge the deficit approach in health research by offering an Indigenous-centred authority of the research as

"ensuring that Indigenous Peoples have authority over how they are researched and how they are portrayed as a result of that research is critical to producing effective and beneficial research" (p. 107).

The women also discussed how current health programmes tend to focus on the treatment of chronic disease, rather than prevention. Indeed, the prevention of chronic disease would ultimately challenge the colonial discourses that rely on our illness to normalize colonial authority over Indigenous Peoples and Lands. Further, governmental campaigns addressed at increasing physical activity tend to focus on individual behaviour and not on emphasizing the community or social support that are necessary to motivate individuals to enhance physicality (Alvaro et al. 2011; Forneris et al. 2013). Creating Indigenous-led physical activity spaces, like Wiisokotaatiwin, is one example of how this occurs and corresponds with the literature on the importance of community for supporting physical activity and wellness (Howell et al. 2016; McHugh et al. 2015; Thompson et al. 2003). The community that Wiisokotaatiwin created resulted in the women gaining confidence with physical activity and, for some, it helped them gain self-confidence in other areas of their lives; as a result, Wiisokotaatiwin simultaneously challenged their internal oppression while also helping them to articulate and, in some cases, challenge the marginalization they experience.

What was it about Wiisokotaatiwin that fostered the women's confidence and enhanced their overall well-being? McHugh et al. (2015) clarified that coming together in a sport (e.g., hockey) "fosters [a] sense of belonging and interaction that is central to community" (p. 81), which was previously shown to be an essential feature to foster confidence and well-being (Howell et al. 2016; Thompson et al. 2003). I believe that gathering together for a purpose, Wiisokotaatiwin, also ignites a deep ancestral trait in Indigenous women—to come together during times of change in order to maintain a community that fosters well-being and safety (Child and Calloway 2012). It is my position that the community that Indigenous women create can also be applied to organize physical activity that centres Indigenous ways of being. Therefore, through training together with kettlebells, in conjunction with creating a supportive space to critically dialogue about their health and other important issues, the Indigenous women created a community that empowered them to be

confident. Importantly, Wiisokotaatiwin provided a welcome counter narrative to the marginalization, racism, and the disparity literature that Indigenous women encounter.

Kerslake (2017) interviewed a Cree medical doctor, James Makokis, who explained that to confront the effects of colonization on Indigenous Peoples' health, Indigenous-led thinking about health, as opposed to topdown, incremental government policies, must be recognized and sustained for lasting changes in health and well-being to take hold in our communities. This resonates with Wilson's (2008) contention that when research and policy are framed by non-Indigenous researchers/policymakers, it ultimately results in the focus on illness, rather than health or wellness. Wiisokotaatiwin used Indigenous-led thinking and practices in research and broke free from the hegemony of the dominant health system (Wilson 2008), demonstrating the significance of using an Anishinaabemowin, gikendaasowin, and izhitwaawin in research. Using the concept of Wiisokotaatiwin to guide this research acknowledges that our language contains "unique bodies of knowledge that may contain some of the most critical solutions to the problems we face as humans" (Hutton 2020, para. 7). Moreover, as the research was framed within an Anishinaabeg inaadiziwin, it resulted in concentrating on the women's strengths and looked to them as the experts about their health and wellbeing, rather than focusing on their health issues (Paraschak and Thompson 2014). Likewise, when I encountered challenges, be it conducting research or personal, my Anishinaabeg gikendaasowin and izhitwaawin reminded me that I was continually guided by my ancestors to undertake the work; this allowed me to create an Anishinaabeg research methodology from which to build meaningful relationships with my research women and is an innovative addition to the field of sociology of sport.

### Limitations

There are a few limitations to the research study. First, I cannot determine if the women sustained their commitment or motivation to engage in physical activity. As a result, I cannot conclude if the collective feeling of

overall wellness and confidence was sustained. Second, there was no land-based physical activity in the programme. Wilson (2003) found that a connection to the land through land-based activities, such as hunting, trapping, or collecting medicines, is an "integral part of First Nations' identity and health" (p. 83). Given the important discussions that occurred between the women regarding ancestral strength gained from the land, any future application of Wiisokotaatiwin should consider integrating some land-based experiences. Third, beyond the offering of tobacco, there were no cultural ceremonies included in Wiisokotaatiwin (e.g., smudging or prayer). As spiritual connection is an important factor in promoting holistic well-being, future research or community programming of Wiisokotaatiwin may wish to include some ceremonial aspects, under the guidance of Elders or other cultural practitioners.

## **Indigenous-Led Research**

The displacement of Indigenous women from the land caused lasting health consequences that researchers have identified as needing to be viewed through an Indigenous-based lens (Reading 2009; Wilson 2003). Western-based analyses of Indigenous Peoples' health compared to non-Indigenous People's health have exposed disparities in such areas as chronic diseases and indicators of well-being. However, in response to the health deficit research, and despite extensive research, few improvements of Indigenous Peoples' health have occurred (Reading 2009). Rather than looking to Western research approaches that create recommendations for Indigenous women's ill health, which do not necessarily resonate with Indigenous Peoples (Ahenakew 2011; Macdonald et al. 2010), Indigenous health researchers have argued that Indigenous Peoples' voices, ideas, and visions must be looked to in order to find novel resolutions. As such, I implemented Wiisokotaatiwin, an Indigenous research methodology and method, to discern what a subset of urban Indigenous women thought about their health and well-being as they relate to colonization, decolonization, and improving health and wellness, while simultaneously engaging in physical activity. I argue that creating supportive spaces for Indigenous women to connect and share our perspectives, while also engaging in physical activity, is a key element for improved health and well-being. Indeed, the women noted feeling more motivated, self-confident, and generally good after the weekly sessions.

Finally, it is my hope that Wiisokotaatiwin may be used as an adaptable tool for Indigenous health researchers and/or Indigenous-led community programmes to further investigate how physical activity promotes health and wellness research. Importantly, while I chose kettlebells as the physical activity for Wiisokotaatiwin, any form of physical activity may be used to foster critical dialogue. What is needed is support to host sessions of Wiisokotaatiwin and an Indigenous community leader and/or programme to implement it/oversee it. Thus, a significant recommendation includes funding for spaces that gather women to intently focus on physicality and community. Finally, in furtherance of Indigenous-led research, and given how Indigenous health research has long been led by non-Indigenous researchers, Wiisokotaatiwin should be used, and further developed and implemented, by Anishinaabeg researchers. Indeed, as Indigenous researchers continue to use our knowledge to apply and mature our Indigenous research paradigms, this will lead to "theory, practice, and methods that are uniquely Indigenous" (Wilson 2008, p. 16).

By centring Anishinaabeg gikendaasowin in my research, I showed the utility of using an Anishinaabeg approach, and I would encourage Indigenous Peoples from other Nations to make similar contributions using their worldviews. For instance, it would be beneficial to have other Indigenous researchers reach into their own Indigenous Knowledge and ontologies to further develop an approach such as Wiisokotaatiwin, based on their own languages. Such practices will promote Indigenous-led solutions to health disparities, which will enrich the methodological approaches that Indigenous health researchers can utilize.

## **Note**

1. Pseudonyms were initially assigned to all women; however, some women chose to use their real names, and in these instances, their names are included.

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