

Visioning Health II: Health, Culture and Gender for HIV-Positive Indigenous Women

Community-Based Research Case Example

WHO

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Community Partners: Elevate NWO, Red Road Healing Society, All Nations Hope, Ka Ni Kanichihk, Shining Mountain Living Community Services, AIDS Saskatoon, PASAN, Cocq-Sida & Open Door

WHY

Research Purpose: The way researchers acquire knowledge in Indigenous communities may be as critical for eliminating health disparities as the actual knowledge that is gained about a particular health problem (Cochrane et al. 2008, p.22)

Visioning Health II had two goals:

1. To co-create new knowledge about the meaning of health and how it intersects with gender and culture for ~70-90 HIV+ Indigenous women from across Canada.

2. To develop and assess the Visioning Health Model as a health intervention for Indigenous women living with HIV - with leadership by Indigenous women living with HIV.

WHERE AND WHEN

Location(s): Eight sites across Canada

Dates: 2015-Present

HOW

Research Methods: Group research process: culturally grounded, strengths-based, arts informed, women-centred, CBPR

Research Design:

Visioning Health II model involved the following components:

- Group Orientation
- Demo, VH Wellness Questionnaire (T1)
- Sharing Circle #1 - Health, Culture, Gender
- Art-Making
- Sharing Circle#2 - Meaning of Artwork
- Art Narrative
- VH Wellness Questionnaire (T2)
- Evaluation Surveys/Sharing Circle
- Celebrate
- Three-Month Follow-Up (T3)

WHAT

Brief Project Description:

Visioning Health II emerged from the Visioning Health I pilot study. Findings indicated that research can be healing for participants, when done with attention to: MEIWA, strengths, Indigenous knowledges, cultural traditions, and ceremony. A request came from the community to develop a national study with an even greater emphasis on MEIWA. Visioning Health II included both qualitative and quantitative tools.

Visioning Health II involved the participation of 67 Indigenous women who are HIV-positive between the ages of 24 to 70 years across eight sites in Canada. Participants engaged in one of two engagement styles or both through a mixed-methods approach.

Engagement style 1 was a 5-day Retreat Style on the land and Engagement style 2 was a 9-week Extended Engagement style in an urban centre.

The Visioning Health II questionnaire questions were based on pre-existing survey tools that have been developed for or adapted to Indigenous worldviews. The survey looked at three areas: connectedness, self-determination, and social-support.

OUTCOMES

The outcomes for Visioning Health II included:

- Increased Support
 - National network of Positive Indigenous Women
 - Cadre of Knowledge Carriers who can work in this area
 - In most cases women are connected locally to services
- Building Capacity
 - Stepping-stone for many women to other work / jobs / goals

CHALLENGES

The two main challenges were:

- Logistics (meeting space, timing, length of time, compensation for CRCs / peer mentors)
- On-going engagement (limited mechanisms for on-going support/engagement of coresearchers/participants in each region).

LESSONS LEARNED

Key Lessons Learned:

- When we create opportunities for women to come together in meaningful ways, in safe spaces, in ceremony, and in strengths, transformation occurs
- Visioning Health is working, i.e., having the effect that we hoped it would
 - Women feel stronger coming out of VH, more connected to themselves, to their peers, to culture, to Creator
 - Feel less alone / have more support o Leads to greater sense of self mastery/self-determination

MORE INFORMATION

Website: <http://visioninghealth.ca/>

Webinar Recording: <http://communityresearchcanada.ca/webinars/>