

Reviews / Comptes rendus

Determinants of Indigenous Peoples' Health in Canada: Beyond the Social

edited by Margo Greenwood, Sarah de Leeuw, Nicole Marie Lindsay, and Charlotte Reading, Canadian Scholars' Press, Toronto, 2015, 279 pp., paper \$54.95 (ISBN 978-1551307329)

DOI: 10.1111/cag.12340

In the opening chapter of this collection, Charlotte Reading explains how the colonial assault on Indigenous cultures and lands across Canada dramatically altered economic, political, and social structures with devastating impacts on Indigenous health and spiritual well-being. She further explains that “[d]isparities in Aboriginal health cannot be understood in isolation of structural determinants such as historical and contemporary political contexts, social structures, and resource distribution” (p. 12). In a later chapter, Chandler and Dunlop describe a “wider interpretive horizon” (p. 79) they hope to introduce in describing the collective cultural wounds that contribute to youth suicide in Canada. This is an apt description for the book as a whole, as contributors to this volume draw attention to complex health determinants like the ones Reading describes, that have tended to be collapsed under the universalizing concept of the “social.” Each chapter in the text builds upon this premise by engaging in deeply contextual, culturally grounded descriptions of Indigenous-specific health determinants, while also acknowledging the role Social Determinants of Health (SDoH) frameworks have played in understanding and addressing health inequities. Rather than provide a chronological overview of the chapters, this review attempts to draw out emergent themes and thus highlight the volume's place within a broad literature.

Efforts to extend and articulate determinants of Indigenous health beyond the SDoH frameworks are apparent in the editors' decision to include stories, poems, personal reflections, and entire interviews. Chantelle Richmond's chapter, for example, on Anishinabe elders' stories of land and health

(Chapter 6), includes long excerpts from interview transcripts, reflecting efforts by Indigenous scholars to avoid decontextualizing research data out of respect for storytelling traditions. This also prevents researchers from “tak[ing] over the conversation” (Wilson 2008, 98). This is important because it is only in the fullness of the story that meaning can be drawn and relationships established with the reader.

The book is arranged under four sections: (1) Setting the Context; (2) Beyond the Social; (3) Wellness Is Knowing Who We Are: Culture, Language, Identity; and (4) Revisioning Medicine: Toward Indigenization. Early in the book, readers are introduced to the concept that there are four components involved in “human wholeness”: spiritual, emotional, physical, and intellectual. Though the term “holistic” (or “wholistic” as Murdena Marshall wants it spelled in Chapter 2, “to remind us of “whole,” not “hole”) has become a common refrain in health care, these chapters challenge simplistic interpretations by providing a rich, nuanced discussion of what it means to actually live in harmony and balance. Throughout the chapters, authors avoid universalizing tendencies in favour of context-specific and relational approaches that privilege local Indigenous knowledge. While many ideas are repeated throughout the chapters—for example connection to land, language, and spirituality as determinants of health—the concepts are activated through the particular practices of Inuit, Mi'kmaw, Cree, and Anishinabe peoples.

One of the more compelling and persuasive arguments within the text is connection/access to land as a determinant of health. Both Sarah de Leeuw (Chapter 9) and Brenda Macdougall (Chapter 18) materially connect health to land. In Chapter 9, de Leeuw makes the point that Indigenous peoples' experience of place is bound up with health, identity, culture, and being, and that the focus on “social” determinants of health risks minimizing these vital connections. She and other authors argue the SDoH frameworks may not sufficiently account for such connections. As Macdougall writes in the context of family relationships: “These frameworks

and webs cannot easily be classified simply purely as ‘social’ determinants of well-being but instead must be in part conceptualized as narratives and dynamic relationalities” (p. 189). Macdougall’s work incorporates historical methods, archival research, and genealogical reconstructions to produce accounts of how relationships to land are governed by the same principles that govern family relationships.

A more sustained focus on the health of Indigenous youth and children would have contributed much to the volume. However, several of the chapters (Roberta Kennedy in Chapter 12, and Karen Isaac and Kathleen Jamieson in Chapter 16, for example) highlight opportunities for improving the lives of young Indigenous people who far too often bear the brunt of ineffective and erratic government strategies. In the face of growing research on high rates of Aboriginal child poverty in Canada, Isaac and Jamieson argue that increased funding to early childhood education strategies are a “legal and moral imperative” (p. 177). Given the Canadian Human Rights Tribunal’s 2016 ruling that welfare services provided to First Nations children and families on-reserve are flawed, inequitable, and discriminatory, Isaac and Jamieson’s chapter is an important contribution to the growing body of research demonstrating the ongoing impacts of structural violence on the bodies of children and youth.

Several chapters address the need for culturally competent health care, particularly in training a new generation of Indigenous health service providers. The powerful stories that conclude the volume, particularly the moving story by Patricia Makokis

and James Makokis (Chapter 19) of a mother and son’s journey through a health system in which they come to fully realize holistic wellness, capture the possibilities that flow from the dedication of educators, students, and health professionals committed to creating new paths through ancient systems.

This volume not only challenges the medical model of care, but problematizes the discursive space taken up by SDOH frameworks that may not account for all health disparities and inequities experienced by Indigenous peoples and communities. The authors invite us to reconsider what health interventions might look like for Indigenous peoples in the wake of colonial policies that created conditions of spiritual destruction and disconnection. This was not a totalizing experience, however, as the chapters in this book make clear. *Determinants of Indigenous Peoples’ Health in Canada* contributes to the growing body of literature on Indigenous resurgence and, in particular, what that might look like at the interface of Indigenous and Western knowledge systems. It does indeed provide a wider interpretive horizon for those interested in Indigenous health while broadening the scope for interdisciplinary inquiry into the diverse ways Indigenous peoples’ health can and should be understood.

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Reference

Wilson, S. 2008. *Research is ceremony: Indigenous research methods*. Halifax: Fernwood Publishing.