

# WELL LIVING HOUSE



## An action research centre for Indigenous infant, child and family health and wellbeing

### What is the Well Living House?

The Well Living House is an action research centre that's focused on Indigenous\* infant, child and family health and wellbeing. At its heart is an aspiration to be a place where Indigenous people can come together to gather, understand, link and share best knowledge about happy and healthy child, family and community living.

The centre is built from a foundation of almost two decades of collaborative work between Indigenous health researchers, front line health practitioners and Indigenous community grandparents.

### What will the Well Living House do?

The long-term vision of the Well Living House is that every Indigenous infant will be born into a context that promotes health and wellbeing - at the individual, family and community levels.

We plan to achieve this vision by improving health policies, services and programs through knowledge work: conducting research, building knowledge networks and providing training.

In all that we do, the Well Living House is committed to using and protecting our Indigenous knowledge, languages and ways of working.

### Who's involved?

The Well Living House is housed at the Centre for Research on Inner City Health (CRICH), part of St. Michael's Hospital in Toronto.

A committee of Elders, the Counsel of Grandparents\*\*, has been struck to guide the establishment and operation of the Well Living House.

### Can I get involved?

We are actively pursuing researcher and community relationships and networks.

To learn more, contact:

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\* We use the term 'Indigenous' to be inclusive of all people who self-identify as Aboriginal, First Nations, Indian, Indigenous, Inuit and/or Métis in Canada, as well as global Indigenous peoples.

\*\* To underline our commitment to action, the Grandparents use the word 'Counsel' (verb) to describe themselves, rather than 'Council' (noun).

"Each time a child is born it represents not only the birth of an individual but an opportunity to rebirth our families, communities and nations." Jan Kahehti:io Longboat



## MESSAGE FROM THE FOUNDING GRANDPARENTS

Greetings! Tansi! Aanii! Booz Hoo! Sekoh!

In Canada and countries around the world, Indigenous children have dramatically worse health outcomes compared to non-Indigenous children. These differences in health - and the scarcity of proven, effective and culturally secure responses to support the health of Indigenous infants, children and families - are unacceptable, especially in a relatively affluent country like Canada.

How can we ensure that our Indigenous health policies, services and programs are effective and culturally secure? We must build them from a strong knowledge base, of Indigenous and public health knowledge.

We, the founding Counsel of Grandparents, acknowledge the need for an Indigenous-led, Indigenous-governed centre of excellence that is dedicated to knowledge work of the highest quality, relevance and usefulness. The Well Living House will be a place where Indigenous people come together to gather, understand, link and share the best knowledge about happy and healthy child, family and community living. We will build on similarities and synergies between Indigenous and western science; access to better health is not about leaving our culture and Indigeneity behind.

Wahkohtowin, the 'spirit of kinship,' will guide our collaborations with others. It is through the rebuilding and re-creation of intergenerational relationships that we will rekindle and transfer knowledge and skills, and enhance self-sufficiency in our communities. Our hope is to collectively build a place of refuge and renewal.

The Well Living House vision is a world in which every infant is born into a context that promotes health and wellbeing - at the individual, family and community levels. There is a lot of work to do. Real change for our grandchildren is going to require strong partnerships and collaborations. If we can find ways to work together, then we can be successful.

Sincerely,

The founding Counsel of Grandparents:

Jan Kahehti:io Longboat

Madeleine Kētēskwew Dion Stout

Carol Terry

"The strength of our foundation will be determined by our ability to come together - across generations, knowledge systems, Indigenous nation identities and community-institutional divides." Janet Smylie

## MESSAGE FROM THE WELL LIVING HOUSE DIRECTOR

Seventeen years ago, I had the opportunity to start my practice as a family physician at Anishnawbe Health Toronto, as part of a health care team that included traditional teachers and healers. This is where I met Jan Kahehti:io Longboat, a Mohawk Elder and Traditional Counselor. I was providing maternity care and attending births, and quickly became concerned about the major health and social challenges facing many of the mothers and infants I saw. I believe that it was during this time that my passion for and commitment to reducing the inequities facing young Aboriginal families crystallized. However it didn't take long for me to begin to feel overwhelmed by it all.

I decided to take tobacco to Jan and ask for her assistance. She told me that if I wanted to help the infants, I needed to think about the grandparents. She then shared the teaching cited on the previous page: Each time a child is born it represents not only the birth of an individual but an opportunity to rebirth our families, communities and nations.

Despite the crisis orientation of front-line medical work, these seeds of wisdom were planted in my consciousness. Over the years, with the ongoing advice and patience of many teachers, my abilities to truly understand and incorporate these teachings into the work that I do has slowly grown. I have learned that Grandparents play a central role in the lives of children in traditional Cree social systems, and that "what makes a baby well?" can be found in the web of relationships between babies, grandparents and other kin, and the lived environment.

Indigenous wisdom and experience, in the form of a Counsel of Grandparents, continues to be the foundation of the Well Living House. The strength of our foundation will be determined by our ability to come together - across generations, knowledge systems, Indigenous nation identities and community-institutional divides. Working together in this good way, we will ensure that every infant is born into opportunity – individually and collectively.

Sincerely,

Janet Smylie

Director of the Well Living House



## WORKING IN A GOOD WAY

It is very important to us that we build and run the Well Living House in a way that advances knowledge and science and honours and feeds Indigenous communities in meaningful ways. The Counsel of Grandparents is essential to support this intent.

### Well Living House values

We will work collaboratively with other Indigenous groups and organizations, and encourage the sharing of resources.

We will cultivate a welcoming, culturally secure environment.

We will encourage cross-jurisdictional and cross-nation collaborations and partnerships that respect our diversities.

We will uncover, innovate and apply traditional and novel Indigenous knowledge methods and technologies.

We will further develop, articulate and follow Indigenous protocols regarding the sharing, protection and application of Indigenous knowledge.

We will facilitate the coming together of Indigenous knowledge keepers, to review and integrate knowledge that has been gathered.

We will develop a resource library of traditional knowledge and public health materials regarding infant, child and family health that are relevant, accessible and useful to Indigenous communities and organizations. The library will include Indigenous curriculum materials.

We will draw on technology and develop tools to support the sharing, protection and application of Indigenous knowledge.

## SPEAKING THE LANGUAGE

For Indigenous peoples, our languages are the foundation of who we are. Knowing and using our words is essential to understanding Indigenous ways of being, knowing and doing.

Here is a list of terms, in the languages of the Counsel of Grandparents, that captures some of the Indigenous concepts that can be applied to the work of the Well Living House.

### Aspēyimisoh (Cree)

'Self-reliance,' closely linked to 'self-determination.' The Well Living House will maintain aspēyimisoh for our organization, and support aspēyimisoh among Indigenous infants, families and communities.

### Oksak- Onwah- Nuwah- (Mohawk)

'Intent,' 'transpiring right now,' 'today/this day.' These terms capture the concept of 'passing on' ancestors' intentions and knowledge; the Well Living House will pass on knowledge that we have received in our teachings, and that we are now learning in our research, to future generations.

### Asitōskāmasoh (Cree)

'Resilience.' Indigenous peoples have acquired an asitōskāmasoh that is rooted in how they have learned to cope with the physical, mental, emotional and spiritual oppression and colonizing practices by mainstream society. The Well Living House will be a place for Indigenous peoples to work together to cultivate their individual and collective asitōskāmasoh.

### Konroronhkwā (Mohawk)

Spiritual, emotional and mental concepts of caring and reciprocity: 'I-to-you,' 'you are valuable,' 'I offer that to you all the time.' The work of the Well Living House will affirm the innate value and preciousness of all children, and respect the depth of inter-relationships among families, communities and partners.

### Nēyowihtā (Cree)

'Quartered frameworks.' Indigenous peoples (particularly First Nations) adopt processes that interrelate four directions (e.g. childhood, adolescence, adulthood, elderhood). The Well Living House will be guided by this approach as it assesses, plans, implements and evaluates its research.

### Otsile, Kawatsile (Mohawk)

Otsile ('fire') is the root word of Kawatsile ('family'); family is fire. We carry the spirit and warmth of family. It is a tightly wrapped function of a unit of people since the beginning of time. The Well Living House honors kawatsile and works together with others to nurture otsile.

### Pōni-waskawīwin (Cree)

'To stop moving is death.' Pōni-waskawīwin speaks to our need to move forward: to grow, adapt and evolve. The Well Living House must seize opportunities and not squander them; Indigenous peoples can't afford to stop moving.

### Nimihitowin (Cree)

'To dance,' 'to move rhythmically.' Nimihitowin reminds the Well Living House team that Indigenous approaches are cyclical and holistic. It encourages us to work rhythmically together, with partners and each other.

### Abinoojii minwendam (Anishinaabe)

'Child,' 'he is happy.' Each time a child is born, it represents not only the birth of an individual but an opportunity to rebirth our families, communities and nations.



"We need to identify and address why it is that Aboriginal children still have barriers when they are born, what those barriers are, and how we can draw on culture and community knowledge to address them."  
Janet Smylie

## OUR KNOWLEDGE WORK

Both Indigenous community-based and mainstream academic knowledge and expertise will inform the work of the Well Living House; we respect both Indigenous and non-Indigenous 'ways of knowing' and doing. Collectively, we will strive to build on synergies between the two, and move beyond historic/current community-university tensions.

The Well Living House will focus on applied Indigenous knowledge translation: getting relevant and useful public health and Indigenous traditional knowledge to health practitioners, program managers and policy makers; and helping them to use the knowledge to improve care and services for the Indigenous population.

### The Well Living House will:

1. Advance our ability to assess and respond to health inequities and barriers to care.

We will work in partnership with Indigenous communities and organizations to further develop applied Indigenous infant, child and family health information and information systems.

This work will include developing new data sets and linkages; assessing and improving the quality and community relevance of existing data sets and data systems; and advancing Indigenous governance and management of Indigenous data sets through advocacy and implementation protocols.

2. Identify and contribute to best practices for improving Indigenous health.

With our community partners, we will develop and implement novel, community-based methods of program and service evaluation; develop, implement and evaluate novel pilot programs and/or services; and "scale-up" identified best practices across Indigenous contexts.

3. Advance Indigenous knowledge translation.

We will identify best practices and use innovative methods for gathering and sharing knowledge with community partners (e.g. social networks, Respondent Driven Sampling, concept mapping).

We will build and share an accessible and culturally secure repository of knowledge, to help put traditional knowledge and community-based approaches at the foundation of Indigenous health care.

We will serve as a bridge between Indigenous science and knowledge work and western science and knowledge work (e.g. developing partnerships that support Indigenous governance and management of Indigenous knowledge and data). Bridging processes will draw on cultural values of exchange; we will call on our Elders and work through ceremony as required.

4. Build research and community capacity.

We will provide training and other forms of capacity building through community-based research methods and building research/evaluation capacities and infrastructure.

**Research topics will include:** Culture based parenting, infant and toddler health promotion, neuroplasticity and child development, trauma and recovery, Indigenous midwifery and sexual/reproductive health. Other topics will be determined in time through community consultation.

**Research approaches will include:** Solutions-based science (e.g. intervention studies, evaluation, integrated knowledge translation, building maternal/child cohorts and databases, establishing a shared knowledge repository).

"Whenever visitors came to our villages they stopped at the edge of the woods, it was our women who went to greet them and assessed whether it was safe for our women and children to let them in to the village."  
Jan Kahehti:io Longboat

## WELL LIVING HOUSE GOVERNANCE

The Well Living House will be governed using two accountability routes: one to St. Michael's Hospital and the other to the Indigenous communities through the Counsel of Grandparents.

We have raised the bar of Indigenous research ethics and governance by developing a Collaborative Research Memorandum of Understanding between St. Michael's Hospital and the Counsel of Grandparents. This agreement will ensure that all of the research done in the Well Living House will aspire to the very highest levels of Indigenous and Western research ethics. This innovative model has the potential to serve as an example for others working in this way around the world.

### Dish with One Spoon\*

Historically, treaties designed by Indigenous peoples in North America were created as mutually beneficial agreements between one another. The 'Dish with One Spoon' was one of the most common of these inter-nation treaties. It was designed to create peaceful hunting conditions for nations in close proximity to each other.

Described as 'one-dish alliances,' these treaties identified a specific area of territory to be held in common. Just as family members ate from 'one dish,' so too would nations eat from one common hunting ground. Through one-dish alliances, two nations agreed to share the same hunting territory without conflicts over land and its resources. Wampum belts were crafted and these belts were symbols of these agreements.

The concept of 'Dish with One Spoon' is still relevant in contemporary culture with all the nations across Turtle Island; First Nations continue to use a 'one-dish protocol' and request permission from their First Nations neighbors to hunt, fish and trap on their lands. The protocol also allows food and medicines to be harvested, and grants the right to travel across the lands.

The 'Dish with One Spoon' protocol can be used by the Well Living House and St. Michael's Hospital. Each entity has accrued many experiential, cultural and professional resources that can be shared to ensure the successful transfer of knowledge about happy and healthy child, family and community living.

### Counsel of Grandparents\*\*

The establishment and operation of the Well Living House will be guided by a committee of Elders called the Counsel of Grandparents. This group has extremely high credibility and influence within and beyond Indigenous communities across Canada. This group will expand with time.

The Grandparents have agreed to serve the Well Living House as role models, strategists, teachers, knowledge keepers, advocates and supporters. A core function of the Counsel of Grandparents is to strongly root the Well Living House development and ongoing operations in Indigenous ways of knowing and doing. Indigenous knowledge will be shared both by oral tradition and example. The Grandparents will help the Well Living House to function in a way that provides individuals and communities with maximum benefits and protection from harm; establish and implement accountability processes and indicators; and promote respect and allegiances between all Indigenous peoples, regardless of externally-imposed labels and political divisions.

### St. Michael's Hospital

The Well Living House will be housed within the Centre for Research on Inner City Health (CRICH), part of the Keenan Research Centre in the Li Ka Shing Knowledge Institute of St. Michael's Hospital in Toronto. CRICH houses an interdisciplinary team of research experts committed to innovative, community-based research methods.

An Indigenous Health Research Unit, under the leadership of Dr. Janet Smylie, has successfully operated at CRICH over the last 5 years. It will be amalgamated into the Well Living House and will provide a solid base for growth. A core strength of the Unit has been the successful negotiation of dozens of research partnerships with Indigenous communities and organizations across Canada and around the world.

\* Some of this text is adapted from the article: Switzer M. "One-dish concept predated European arrival". Anishinabek News, December 2011.

\*\* To underline our commitment to action, the Grandparents use the word 'Counsel' (verb) to describe themselves, rather than 'Council' (noun).

## WHO'S INVOLVED

### Director of the Well Living House

Janet Smylie is a Métis family physician and research scientist. She is a senior research scientist at CRICH, an adjunct scientist at the Institute for Clinical Evaluative Sciences, an associate professor at the University of Toronto in the Dalla Lana School of Public Health and a staff physician in Family and Community Medicine at St. Michael's Hospital. In addition to her MD, Janet has a Masters in Public Health from Johns Hopkins in Baltimore, USA. Her primary research interests are Indigenous public health, Indigenous knowledge and knowledge translation, perinatal surveillance and Indigenous health information systems. Janet currently holds a 'New Investigator Award' from the Canadian Institutes of Health Research and was recently awarded a National Aboriginal Achievement Award.

### Founding members of the Well Living House Counsel of Grandparents

Jan Kahehti:io Longboat is a mother of three daughters, one son and ten grandchildren. She is the keeper of Earth Healing Herb Gardens and Retreat Centre at Six Nations. During her life she has experienced the many losses of our values, culture, language and traditional healing arts and medicines. For most of her life, Jan has worked in education and the healing arts to bring back what she has experienced in loss. She has focused on the 'power of the Good Mind' to bring about well-being in her life, and now teaches in her community and in learning institutions around the country. Jan Kahehti:io believes our ancestors have left us a great legacy of knowledge in how to have 'good well-being.' Our responsibility is to go back and pick up the pieces that we have left along our journey of 500 years. Jan Kahehti:io presently services First Nation communities in Indigenous practices of Healing and Well-being.

Madeleine Kētēskwew Dion Stout. Through her numerous accomplishments as a nurse, teacher and philosopher, Ms. Dion Stout is a leader in the health development of Aboriginal people. Ms. Dion Stout's family provided her with a strong head start on the Kehewin First Nation. After graduating as a registered nurse in 1968, she returned to school to complete a Bachelor of Nursing with Distinction. She then completed her MA in International Affairs. Because of her numerous successes, Madeleine Kētēskwew Dion Stout was honoured with an honorary doctorate from the University of British Columbia. As well, the Canadian Nurses Association chose her for the Centennial Award that was given to 100 outstanding nurses in 2008. Ms. Dion Stout was appointed by Prime Minister Jean Chretien as a member of the National Forum on Health. Recently, she was appointed Vice-Chair of the Mental Health Commission of Canada. She also serves on several non-governmental boards and committees. Currently, Madeleine Kētēskwew Dion Stout is the president of her consulting company, Dion Stout Reflections, which has positioned her as an authority on using a Cree lens to understand Aboriginal health.

Carol Terry is originally from Obizhigokaang First Nation (Lac Seul). Her parents, Mary Elsie Cromarty and John Kenny, raised the family on their traditional lands and waters of Lac Seul. Carol attended Pelican Lake Residential School near Sioux Lookout, and Cecilia Jeffrey in Kenora. She is a graduate of Beaver Brae Secondary School, Kenora. As an adult learner, Carol has completed her BA through distance education from Lakehead University, and most currently completed her Bachelor of Education degree from Queen's University and Seven Generations. Carol is a strong believer of life-long learning. In the health field, Carol has been employed as a Program Manager for Health Canada, and as a Health Director for two different tribal councils in Sioux Lookout. Together with Tom, Carol raised 3 children: Cal, Kanina and Jesse. They are now proud grandparents to Jaylynn, Tevai, Dolor and Miaka. Tom and Carol are delighted to have all their children and grandchildren living in Sioux Lookout. The Terry family is passionate about being out on the land and they continue to travel the many waterways of north western Ontario by canoe.

We would also like to acknowledge the major contributions of Métis author, playwright, broadcaster, filmmaker and Elder, Maria Campbell, who participated as a founding grandparent in the initial Well Living House strategic planning cycle. The Well Living House foundations have been heavily fortified thanks to her vision, wisdom and commitment to Indigenous infants, children and their families.



"We have been undressing for too long, it is time to put our clothes back on. It is time to go back home. Take the water that flows, and the lakes and bring them back in here within your spirit. The fish in the water, the insects, the animals, the birds that fly and those that do not, and bring those too, back within you. The trees and rocks, the land and sky, the clouds, the winds, the air, the stars, and bring these too back within you where they rightfully belong. Take the spoken word in every language there is on this Earth, this too belongs within you. Then, and only then, will you be home and you will be fully dressed, and when the knock comes to your door you will be there to open it. Each foot will know exactly where to fall. You then cannot make a mistake."

– Elder Dan Pine, Garden River First Nation

The long-term vision of the Well Living House is a world in which every infant is born into a context that promotes health and wellbeing – at the individual, family and community levels.

This vision is alive in the Christi Belcourt painting Honouring my Spirit Helpers - Baagitchigawag Manitou, which is reproduced here with permission of the artist.

The painting shows the web of inter-relationships between humans, animals, plants, earth, water and the lodge. The artist tells the story of the painting as follows:

"When the world was covered in water in the great flood, Nanabozho (Wesakechak) was sitting on a log on top of the water. He thought that if he dove to the bottom of the waters and got a small bit of earth, a new land could be created for everyone. But the waters were too deep. Nanabozho, the turtle and the loon all tried to swim to the bottom, but none could hold their breath long enough. Finally, the muskrat offered to try, and he was gone a very long time. At last, the muskrat floated to the top of the water. He had held his breath too long and had sacrificed his life. Nanabozho lifted him onto the log, and saw a small bit of earth under Muskrat's nail. He took the earth and put it on Turtle's back, and the dirt grew and grew. With that he was able to save the world.

This painting is about life. It is about the energy that comes from the core of Mother Earth, who births us out of water and womb into a world that is bright and thriving. Everything we need to know is here within us and around us, and when we acknowledge these things and learn to listen to them, they will guide us throughout our lives. We honour these things and try to give back for these gifts within our ceremonies.

A large portion of the painting is water; water is full of spirit and is vital to our survival. The mound of earth is in the shape of a sweat lodge. The sky is in the shape of the Midewin lodge. We celebrate life in the sweat lodge and in the Midewin lodge. We celebrate the medicines that are given to us from the Earth.

The spirits are all around us, in the waters and in the rocks in the earth. The stars in my paintings are also a symbol for the spirit world. The roots are there to show that all life needs nurturing from Mother Earth in order to survive. They also show that our ancestors have great influence over our lives, and that there is more to see spiritually than what we can see with our eyes."

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