



Native Women's
Association of Canada

L'Association des
femmes autochtones
du Canada

A Culturally Relevant Gender-Based Analysis (CRGBA) Starter Kit:

Introduction, Incorporation, and Illustrations of Use

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PART I: INTRODUCTION

Gender-based analysis (GBA) was founded in tandem with second-wave feminism, which was centred on reproductive rights, wage equality, and gender-based violence (Molony, 2017). Consequently, its failure to acknowledge the lived realities of people of colour and Indigenous women has drawn criticism. While great advances have been made for women's equality, disparities still exist within health, social, political, and economic sectors, and these disparities are often magnified for Indigenous women. As it stands, much like second-wave feminism, mainstream GBA fails to meaningfully address the social, political, and cultural realities of Indigenous women.

Culturally relevant gender-based analysis (CRGBA) considers the historical and current issues faced by Indigenous women, including the impacts that colonization and intergenerational trauma have caused. When policy work lacks a CRGBA, there is a risk of perpetuating further marginalization, oppression, and/or violence against Indigenous women. It is essential to consider the impacts of policy and programs, specifically as they pertain to First Nations, Métis, and Inuit women. A culturally relevant gender-based perspective is one way of minimizing the potential for harm.

The Native Women's Association of Canada (NWAC) acknowledges that mainstream GBA frameworks do not include a cultural or historical perspective, nor do they account for the intersecting aspects that make up the identity of Indigenous women, Two-Spirit, or gender-diverse people. As NWAC views culture as an evolving entity, our approach to CRGBA is fluid and ever-changing.



MAINSTREAM GBA+

As it stands, mainstream GBA+ frameworks do not meaningfully acknowledge or address the specific realities, barriers, and challenges faced by First Nations, Métis, and Inuit women in Canada. This is evident when GBA+ is discussed or implemented and adopts a “pan-Indigenous” approach, where First Nations, Inuit, and Métis people are viewed as one cohesive (or homogenous) group rather than as distinct communities, each with separate realities, lived experiences, and histories of colonization. Further, within these three groups, individuals will have differing experiences based on their intersecting identities: Are they status or non-status? Are they a land claim beneficiary? Do they live in rural or urban areas? Do they identify with and practise their culture? Every single Indigenous person will be affected differently, and it is necessary to be as specific and distinctions-based as possible when developing policy or programming.

One of the biggest gaps in mainstream GBA+ is that it fails to adequately bring up the role that colonization has played in the ongoing trauma and violence for First Nations, Métis, and Inuit women and gender-diverse people. CRGBA works to close this gap and recognizes the persistent and harmful impacts that colonization has had and continues to have on the lives of Indigenous women and gender-diverse people. Colonization has affected individuals, communities, and Nations in ways that are unique to their distinct histories and current realities. When policy and programs are developed without taking into account the history and impacts of colonization, we risk producing more gaps and barriers and, ultimately, perpetuating more harm against an already marginalized and vulnerable group.

For example, the “birth alert” policy that is still used in hospitals across Canada has a disproportionate impact on Indigenous women. The birth alert policy is not federally regulated but left to the discretion of provinces and territories (Stueck, 2019). This policy has hospitals alert child welfare authorities if they believe the newborn could be at risk due to their parents’ backgrounds and/or if they had a child previously who was taken into care. British Columbia recently ended this practice, citing that over half of the notifications issued were for Indigenous mothers (Stueck, 2019), despite only accounting for 5.9% of the population (Statistics Canada, 2016). Without accounting for the history of colonialism and the legacy of the Residential School System and the Sixties Scoop, which sought to remove Indigenous children from their homes and “kill the Indian in the child,” we risk further harming an already marginalized group. Indigenous women have been subjected to colonial violence since settler contact introduced patriarchal values to communities. Patriarchal settler society regarded Indigenous women as unequal to men and reduced their rights; this lessened the traditional honoured and respected leadership roles that Indigenous women had previously fulfilled in their homes and communities (FemNorthNet, 2016).

Mainstream GBA+ policy is merely reactive, fails to address root problems, and further contributes to harming Indigenous Peoples and communities through the removal of Indigenous children from their families, communities, and cultures. If a CRGBA lens were actively applied to this policy, the results would be less harmful. Providing early supports and preventative services while keeping in mind the impacts of intergenerational trauma on Indigenous women is more in line with CRGBA and works to address the root problems.

Any equitable and inclusive public policy requires accounting for the distinct conditions and circumstances between and among Indigenous women, girls, Two-Spirit, and gender-diverse people. There is consequently a need for CRGBA to be utilized at every level of policy, programming, and implementation, as well as throughout service provision. NWAC’s approach to CRGBA acknowledges that mainstream GBA frameworks do not include a cultural or historical perspective, nor do they account for the multifaceted, intersecting aspects that make up Indigenous women’s identities, including ethnicity, cultural identity, gender identity, sexual orientation, ability, class, or geographical location. Given its commitment to informing equitable, inclusive, and transformative programs and policies, NWAC strives to close this gap.





PART II: INCORPORATION

DISTINCTIONS-BASED CRGBA

NWAC views culture as an evolving entity; therefore our approach to CRGBA cannot be static and must continue to evolve with it. Transformative change within the lines of social policy is possible but it requires a lifelong commitment, at the individual and collective level, to remaining open to learn new ways of doing things. The emergence of a distinctions-based framework shows us that there is the opportunity for continued learning and exposure to other ways of knowing, which will allow us to design more inclusive and socially just policies and programs.

A distinctions-based CRGBA recognizes and accounts for the distinct lived experiences not only between but within First Nations, Inuit, and Métis communities and individuals. Rather than taking a one-size-fits-all, pan-Indigenous approach, distinctions-based CRGBA recognizes that these three separate groups all have had separate experiences with colonization, have different experiences navigating their lives, and will be impacted differently by policies and programs. The Non-Insured Health Benefits (NIHB) Program is a perfect example of a health program that impacts Indigenous women differently, as only status First Nations and Inuit recognized by an Inuit land claim organization are eligible. Distinctions-based CRGBA reduces the potential risk for harm that emerges when you lump people with distinct, rich, and varied histories and cultures together and make assumptions about their lived experiences.

For example, a status First Nations woman experiencing problems with substance use who has access to government-funded treatment options will have a different experience than a non-status First Nations woman who is seeking help for the same concern. Rapid environmental changes due to climate change are experienced differently by an Inuk woman living in Inuit Nunangat than one living in urban Ottawa. Métis women, with their distinct customs and way of life and exclusion from the Indian Act, cannot access many of the benefits available to First Nations and Inuit women. If one wishes to develop a fully formed, inclusive policy or program, these differences must be considered from the beginning and throughout the development and implementation process.

CRGBA needs to account for these distinctions and must consider how the research or policy in question impacts all Indigenous women, Two-Spirit, and gender-diverse people. It is also necessary to account for those who are potentially left out of the research and/or policy framework, as there are numerous gaps and barriers that one may experience when attempting to access data about Indigenous women, girls, and gender-diverse people.

In a policy context, the aim of CRGBA is to enhance Indigenous women's access to rights and services and to ensure that access to these rights and services is equitable, inclusive, and responsive to present gaps. If this framework is used across organizations and government departments, it could markedly increase the Canadian government's accountability for responding to the lived experiences of people who are multiply marginalized, as well as overall consistency for how CRGBA is applied in a policy context.



GENDER DIVERSITY

NWAC recognizes that sexuality and gender are fluid and that one's gender and sexual identity is specific and personal to that individual. Prior to colonization, Indigenous communities across Turtle Island and Inuit Nunangat had their own definitions and understandings of these identities. Patriarchal and heteronormative values introduced to Indigenous communities by European settlers disrupted these systems, which had given people the freedom and safety to live as their authentic selves. These values were upheld and enforced through assimilation attempts such as Residential Schools, forced migration, the Sixties Scoop, and violence toward Indigenous women, girls, and gender-diverse people. These systems of power erased a rich and proud history of Two-Spirit people in most Indigenous nations where there had been room for alternative genders and sexual identities beyond that of male/female gender binaries and heterosexual orientations (Taylor and Ristock, 2011).

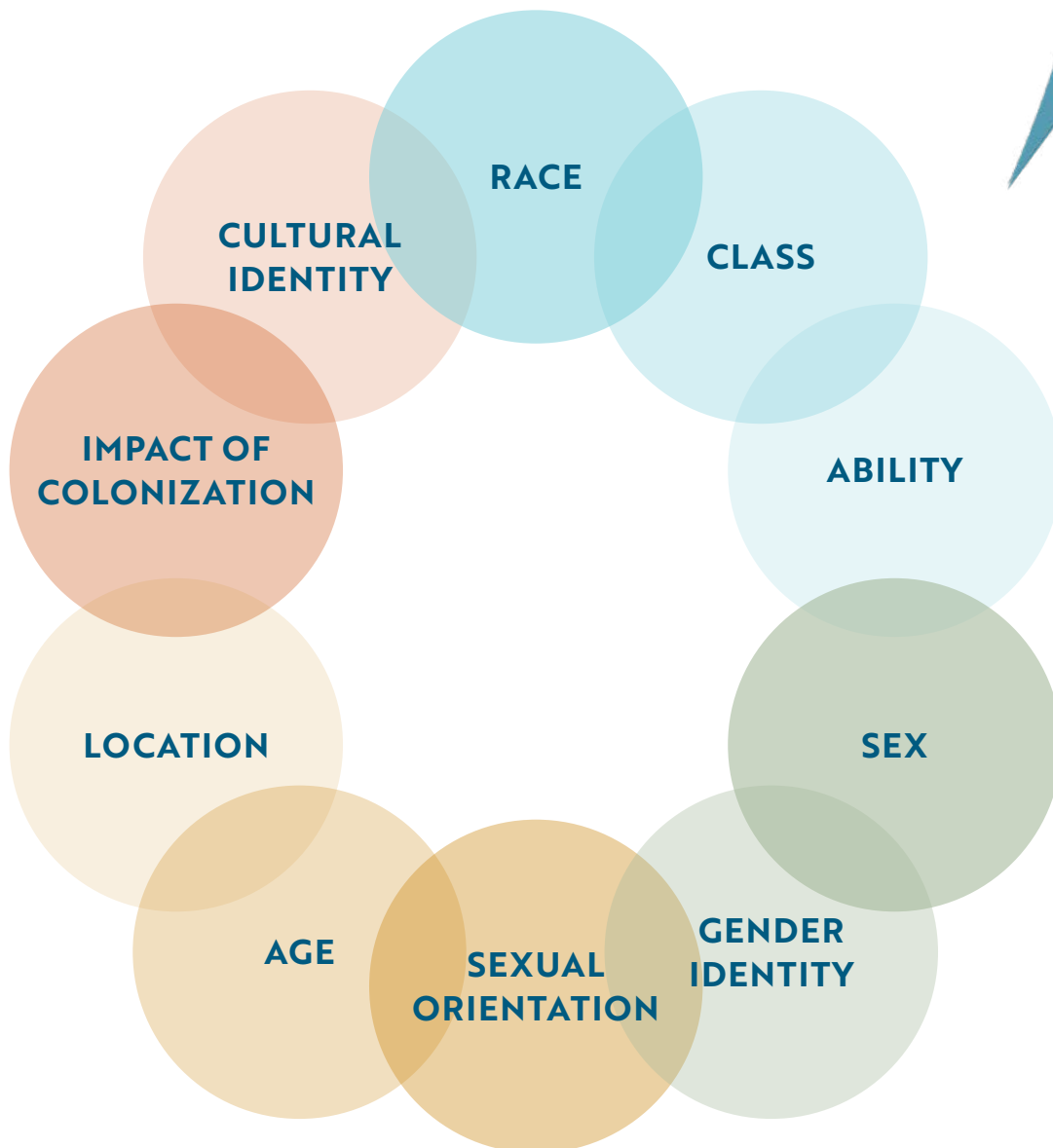
Two-Spirit is a term that incorporates Indigenous views of gender and sexual diversity and encompasses sexual, gender, cultural, and spiritual identity. It may be used among some Indigenous communities/peoples, rather than, or in addition to, identifying as LGBTQ+, although not all LGBTQ+ Indigenous people consider themselves to be Two-Spirit. Though suppressed through the process of colonization, a Two-Spirited person may have specific roles containing cultural knowledge and governance structures, these roles may vary and are specific to each individual community. Due to its cultural and spiritual context, the term Two-Spirit should only be used for Indigenous people.

An essential component of CRGBA is to be critically reflective of how societal sexuality and gender norms are operating in our everyday lives, including the work we do, and to be an active participant in resisting a tendency to perpetuate those harmful colonialist ideals.

INTERSECTIONALITY

The term intersectionality was coined by African-American legal scholar Kimberlé Crenshaw in 1991; it encapsulates the idea that identity and oppression are multi-dimensional and create complex, interlocking social and economic barriers. Intersectionality allows us to think about how the different aspects of our identity come together and create unique experiences in relation to power. For example, the lived experiences of an able-bodied, heterosexual white woman will be distinct from those of a disabled, lesbian-identified white woman or an able-bodied, heterosexual Indigenous woman.

Much like a distinctions-based lens, incorporating intersectionality must be a part of the foundation of the policy process — never as an afterthought. At NWAC, intersectionality is viewed as an integral part of the process and includes:





Additionally, as a feminist organization that applies a culturally relevant, gender-based, trauma-informed, and intersectional lens to its research, policy development, and advocacy work, NWAC recognizes that the Two-Spirited and lesbian, gay, bisexual, transgender, and queer (2SLGBTQ) community are impacted by systemic discrimination. This discrimination is rooted in colonization and racism, and is currently upheld by systems of whiteness, heteronormativity, and patriarchy. 2SLGBTQ First Nations, Inuit, and Métis women are disproportionately impacted by instances of discrimination and oppression, which is why NWAC recognizes that *“any toolkit aiming to facilitate culturally appropriate gender-based analysis must be framed by decolonized understandings of gender, sexuality, and identity, as well as acknowledge the intergenerational impacts of traumas inflicted by colonialism on communities”* (NWAC’s Culturally-Relevant Gender-Based Analysis Preliminary Research Report, 2018).

INDIGENOUS KNOWLEDGE

There is no uniform definition of Indigenous knowledge accepted and recognized by all, in part because there are over 5,000 different Indigenous groups globally (Cultural Survival, 2018). Although it can mean different things to different cultures, Indigenous knowledge broadly refers to the understandings, skills, and philosophies developed by societies with long histories of interaction with their natural surroundings. For Indigenous Peoples, local knowledge informs decision-making about fundamental aspects of day-to-day life. This knowledge is also integral to a cultural complex that encompasses language, systems of classification, resource use practices, social interactions, ritual, and spirituality (UNESCO, 2017). Indigenous ways of teaching and learning include ceremonies, dreams, visions and visioning, fasting, storytelling, learning-by-doing, land-based learning, observation, reflecting, and creating. More broadly, Indigenous knowledge can be characterized as adaptive, cumulative (i.e., developed over centuries), holistic, and observant (i.e., based on what is best for community well-being far into the future) (ICT, 2018).

INDIGENOUS WOMEN’S KNOWLEDGE

Although there are differences across communities, “the relationship between Indigenous women and the land is often one of responsibility. Responsibility to the land and non-human entities means ensuring they are healthy and viable for future generations. Such responsibilities can range from acting as keepers and teachers of community-based ecological knowledge, to initiating action to protect the land and environment when it is threatened” (Bond & Quinlan, 2018, p. 11). Indigenous women’s physical, spiritual, and cultural relationship with the environment and its resources create an intimacy and invaluable knowledge base for program and policy development.

A policy approach that is respectful and inclusive of Indigenous knowledge must acknowledge how assimilative and oppressive colonial agendas have and continue to actively delegitimize Indigenous ways of knowing. Further, a distinctions-based CRGBA recognizes that colonization has distinctly impacted First Nations, Inuit, and Métis women’s ways of knowing with varying social, cultural, economic, and political ramifications. NWAC therefore views Indigenous women’s ways of knowing as unique, valid, and invaluable.

Incorporating a distinctions-based, intersectional, and inclusive approach, as well as CRGBA more broadly, requires that one’s values be set aside. In other words, conducting a CRGBA means undertaking the process of unpacking long-held beliefs about Indigenous Peoples, as well as addressing privilege and countering internalized colonial and patriarchal values. This requires answering uncomfortable questions about beliefs and ideas that may not have a clear source or origin.

At an organizational level, implementing CRGBA means giving staff the tools, training, and time to answer these questions in a safe and stigma-free space. Ideally, this work should be continual, occurring in a series of training sessions and in a group setting.

Integrating CRGBA into our daily lives is not an instant process but a lifelong commitment to continued learning, as well as unlearning any internalized heteronormative, patriarchal, and/or anti-Indigenous beliefs. It is essential for working towards reconciliation and designing inclusive and socially just programs and policies.

CRGBA framework has four pillars:

1. Distinctions-based

Does the program or policy recognize and account for the distinct lived experiences between and among First Nations (both on-reserve and off-reserve, both status and non-status), Inuit (land claim beneficiary or not, living in Inuit Nunangat or not), and Métis (urban or rural) individuals?



2. Gender Diversity

Is the program or policy gender-inclusive and non-binary, recognizing that gender, sex, and sexuality are spectrums? For example, assigned sex includes male, female, or intersex; gender expression includes possibilities beyond masculine or feminine. While the following list is not exhaustive, gender identities include cisgender, transgender, gender fluid, or agender; and sexual orientations include Two-Spirit, queer, heterosexual, bisexual, or demisexual (i.e., attraction only to those with whom a deep emotional connection has been established).

3. Intersectionality

Does the program or policy account for intersecting identities as the foundation rather than as a matter of inclusion? Remember to consider:

- ◇ Cultural identity
- ◇ Race
- ◇ Class
- ◇ Ability
- ◇ Sex
- ◇ Gender identity
- ◇ Sexual Orientation
- ◇ Age
- ◇ Location
- ◇ Impact of colonization

These axes are simply a starting point. There are many more aspects that influence how someone experiences structural systems, and we must consider how all these intersecting identities interact with one another and influence the amount of privilege and/or oppression one will experience.



4. Indigenous Knowledge

Does the program or policy place value on non-Western ways of knowing and transmitting knowledge, such as storytelling, ceremonies, sharing circles, or land-based learning?

Does the program or policy place value on Indigenous women's ways of knowing?



CONCLUSION

The implementation of a CRGBA framework should be viewed as an opportunity to challenge the assumption that all people are affected by policies and programming in the same way. Furthermore, CRGBA provides a foundation to better advocate for the safety, empowerment, and self-determination of First Nations, Inuit, and Métis women, girls, Two-Spirit, and gender-diverse people in all of the work that we do.

This starter kit should not be viewed as a complete how-to guide, as how we go about implementing CRGBA should be ever-changing and expanding. Rather, it should be viewed as an introduction on how we can begin thinking about designing policies and processes that consider the whole person and their lived experiences.

The inclusion of the voices of First Nations, Inuit, and Métis women, girls, Two-Spirit, and gender-diverse people is essential when developing any CRGBA. As the experts of their own lives, Indigenous Peoples can provide invaluable insight and knowledge that a Western framework cannot begin to capture.



PART III: ILLUSTRATIONS OF USE

Health Canada's medical evacuation for birth policy requires all pregnant First Nations women living on rural and remote reserves to leave their communities between 36 and 38 weeks of gestational age to travel to urban centres to await labour and birth (Lawford et al., 2018). The policy also provides recognized Inuit with coverage with the same services.

While some Indigenous communities have had success re-matriating birth back to their communities, many Indigenous peoples are still reliant on the evacuation policy for labour and birthing services.

Let us examine this scenario using the four pillars of a CRGBA to identify gaps and opportunities for improvement that will make the service more accessible and beneficial to Indigenous women in Canada who are expecting a child.



Ask yourself: Does this program or policy place emphasis on **non-Western and/or Indigenous knowledge**?

Regarding the evacuation for birth policy, the National Aboriginal Council of Midwives (NACM, 2019) states:

NACM strongly advocates for the return of birth to all Indigenous, remote, and rural communities in Canada. It is vital that Indigenous Peoples are surrounded with all the love and support possible, which includes their families, community members, and the land. Giving birth in community is safe; communities under the care of a community midwifery program with careful risk screening can have better health outcomes than communities which have a blanket evacuation policy.

A CRGBA of this policy would reveal that the current birth evacuation policy does not meet the needs of First Nations and Inuit women in a culturally safe way. While some people may require or even prefer to give birth in a hospital, increasing access to Indigenous knowledge through the practice of Indigenous midwives and doulas is a possible solution to address the gaps present in this current policy.



Ask yourself: Does this program or policy employ a **distinctions-based** lens?

Implementing a distinctions-based CRGBA is an opportunity to address one of the Truth and Reconciliation Commission of Canada's Calls to Action: *"In order to address the jurisdictional disputes concerning Aboriginal people who do not reside on reserves, we call upon the federal government to recognize, respect, and address the distinct health needs of the Métis, Inuit, and off-reserve Aboriginal peoples."*

As the birth evacuation policy is covered under the Non-Insured Health Benefits (NIHB) program, which only a First Nations person who is registered under the Indian Act and an Inuk recognized by an Inuit land claim organization are eligible for, it can be understood that this policy fails to meet the diverse needs of Indigenous women who are expecting a child, as it is only accessible to a specific subset of the population.

Although the criticisms of the policy noted above are valid, some women living in remote and rural communities may need to access hospital care due to higher-risk pregnancies or medical issues experienced during pregnancy. However, some Indigenous women are excluded from this policy: for example, Métis, non-status First Nation, or an Inuk who is not a beneficiary of a land claim agreement.



Ask yourself: Is the program/policy **gender-inclusive and non-binary**, recognizing that gender and sex are spectrums?

As it is typically cisgender women (but not always) who require pregnancy and birthing care, it is critical that any policy involving them addresses the specific needs and supports necessary to have a positive and healthy birthing experience. Up until 2017, Indigenous women leaving their communities to give birth under the medical evacuation policy were most times required to travel alone, since funding for a travel companion was not covered under the policy. For women who are travelling far away from their home communities to give birth in a hospital, often spending weeks alone before and after giving birth, the isolation and anxiety experienced during this travel could have negative implications for what should be a joyous occasion.

If this policy was developed using a CRGBA lens, funding for an escort to provide emotional support and care could have been included from the beginning and could have prevented many traumatic birth experiences from women being forced to leave their land, culture, and family.

People who identify as non-binary can still get pregnant, and although it is almost impossible to access data about their birthing experiences, it is also important to consider their needs. Currently, the data and literature available regarding the evacuation policy only refer to women and uses feminine pronouns (she/her). It seems like a small thing, but a lack of neutral pronouns could potentially alienate a non-binary person and contribute to further marginalization of an already vulnerable group. Indeed, existing research shows that non-binary individuals seeking health care encounter widespread discrimination and barriers to receiving gender-affirmative and culturally competent care (Berger et al., 2015); however, gender-affirming care (which includes inclusive and respectful pronoun usage) improves mental, emotional, and physical health outcomes (see Connolly et al., 2016; Hodax et al., 2019).



Ask yourself: *Does this program or policy **account for intersecting identities** as the foundation rather than as a matter of inclusion?*

A good program or policy acknowledges that the whole person comprises many intersecting identity factors (e.g., gender, race, class, ability, sexual orientation, experiences of trauma), each of which interact with and influence that person's social location, the levels of privilege and oppression they experience, and how they navigate society. Especially when working with First Nations, Métis, and Inuit women, Two-Spirit, and gender-diverse people, it is necessary to consider the impacts and influence that their culture and colonization has had on their lives.

The birth evacuation policy seems simple in writing: a pregnant person who lives in a remote community is transported to a community that has the necessary medical infrastructure to provide them with care – until you consider questions like:

- ◇ Do they have a close family member/friend/partner who is able to make the trip with them?
- ◇ If they are 2SLGBTQ+, will the hospital be a safe space for them? Will they/their partner be treated with the same respect as a heterosexual and/or cisgender couple?
- ◇ Do they have other children at home? Are they able to secure and/or afford adequate childcare?
- ◇ What kind of resources does the hospital have in place for language barriers? For access to ceremony?
- ◇ Have they ever experienced discrimination at the hands of a medical professional or other person of authority?

It is necessary to consider questions like these and to be as inclusive as possible when designing a policy or program. Intersectionality must be the foundation of the policy, not an afterthought, or we risk the further perpetuation of marginalization and oppression against Indigenous peoples. A policy that is intersectional from the ground up and considers the whole person will contribute to a more inclusive, equitable, and just society.



ILLUMINATING ADDITIONAL EXAMPLES OF CRGBA

Let us examine this scenario using the four tenets of a CRGBA to identify gaps and opportunities for improvement in [insert service/program/initiative here] that will make it more accessible and beneficial to Indigenous women in Canada [specify population if necessary].

[1 paragraph description of scenario]



Ask yourself: Does this [program, policy, legislation, or initiative] place emphasis on **non-Western and/or Indigenous knowledge?**



Ask yourself: Does this program or policy employ a **distinctions-based** lens?



Ask yourself: Is the program/policy **gender-inclusive and non-binary**, recognizing that gender and sex are spectrums?



Ask yourself: Does this program or policy **account for intersecting identities** as the foundation rather than as a matter of inclusion?

[1 paragraph addressing certain questions that should be asked in the context of the case study in order to adequately account for intersecting identities]



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