Exploring Métis health, spirituality, and wellbeing: A patient-oriented community-based pilot

study with the Métis Nation of Alberta - Region 3

Carla S. Ginn, RN, PhD Faculty of Nursing, University of Calgary 2500 University Dr. N.W Calgary, Alberta T2N 1N4 Email: cginn@ucalgary.ca Telephone: 403-220-4440 Fax: 403-284-4803 ORCID 0000-0002-8343-1388 Corresponding author

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Craig W. C. Ginn, BA, MA, PhD Department of Classics and Religion, University of Calgary 2500 University Dr. N.W Calgary, Alberta T2N 1N4 Jn 3 Email: cwcginn@ucalgary.ca Telephone: 403-220-5886

Lawrence Gervais **Regional President** Métis Nation of Alberta – Region 3 (403) 569-8800 lgervais@metis.org

Judy Gentes **Regional Vice-President** Métis Nation of Alberta – Region 3 (403) 569-8800 jgentes@metis.org

Doreen Dumont/Vaness Bergum Elder Métis Nation of Alberta - Region 3 (403) 569-8800 ldbergum@telus.net

Noelle Rees Member Métis Nation of Alberta - Region 3 (403) 569-8800 laughingyoga@hotmail.com

Travis Ronald Member Métis Nation of Alberta - Region 3 (403) 569-8800 silvr8@hotmail.ca

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59 60 Tom Doupé Member Métis Nation of Alberta – Region 3 (403) 569-8800 <u>tsdoupe@telus.net</u>

> Ashley Camponi Member Métis Nation of Alberta – Region 3 (403) 569-8800 alcamponi@gmail.com

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Lay summary

Historically, Métis people were of North American Indian and European ancestry, and travellers who formed distinct communities. Due to ongoing effects of colonization, including questioning of Indigenous identity, changes to traditional ways of life, and a lack of legal rights, Métis people in Canada have experienced multiple inequities and intergenerational trauma, affecting individual, family, and community health and wellbeing. There is much information about colonization, loss, and marginalization for Métis people. However, more Métis-guided community-based research is needed about building community, developing social support, and practices for healing and health. The purpose of this study was to explore links between health, spirituality, and wellbeing within the Métis Nation of Alberta (MNA)-Region 3. We met with elected MNA – Region 3 leaders to discuss potential study topics and discussed ways to go about the study. With community members, informal and elected leaders, and an Elder from the MNA-Region 3, we co-developed a survey and distributed it face-to face with MNA – Region 3 members in Calgary, AB. We held a working group to analyse survey results together, developing themes and recommendations, which were shared and confirmed by the community. The top three priorities were: (1) passing on Métis traditions and culture to younger generation; (2) blending different cultural and spiritual practices; and (3) cultural immersion/traditional knowledge/learning in community. Community pilgrimages to sacred sites and regular community gatherings with spiritual, cultural, and educational focus provide potential to enhance health, spirituality, and wellbeing. Similar research across the remaining 5 regions in the MNA is recommended.

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Introduction

The Truth and Reconciliation (TRC) Commission of Canada Calls to Action (1) indicate research arising from within First Nations, Métis, and Inuit (FNMI) communities can promote equity and justice. Historically, Métis people were of North American Indian and European ancestry, founders of the fur trade, and travellers who formed distinct communities, keeping close ties with families and kin who lived across a vast region. (2, 3) Métis leader Louis Riel (1844-1885), negotiated Manitoba's entrance into Canadian confederation, and was subsequently forced into exile.(3) Riel, a devout Catholic, celebrated his Indigenous ancestry:

Indian Blood throbs in me:

And I praise my ancestors

Who in the sweetest tone

Taught me the Huron Carol (4, p. 13)

Riel was requested by Métis people in Saskatchewan to obtain titles for their land, and together with Gabriel Dumont, Riel waged a resistance against the Canadian government.(3) This resistance peaked in 1885 at Batoche, SK, where 5,000 Canadian soldiers fought 400 Métis and Cree; Métis families were scattered and forced into hiding.(2) Riel gave himself up for trial, was executed, and many Métis leaders were jailed. Additional intergenerational trauma (caused by physical, social, and cultural violence), occurred with the advent of residential schools and the Sixties Scoop.(2, 5) Approximately 9% of children taken to residential schools were Métis.(6) During the Sixties Scoop thousands of FNMI children were placed in foster care, and adopted by mostly non-Indigenous families throughout Canada and the United States. (5, 7) First Nations and Métis children in foster care are among

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the most vulnerable children in Canada.(8) Currently, 7% of children in Canada are FNMI, yet they comprise 52% of children < age 14 in care.(9)

Métis people have experienced marginalization and decreased wellbeing for varying reasons: (1) scepticism of their identity as Indigenous people; (2) classification as Halfbreeds; (3) government acquisition of land; (4) questioning and regulation of traditional ways of life; and (5) encroachment on socio-economic and legal rights.(10) Much research regarding detrimental effects of colonialism exists, but there is a lack of Métis-guided decolonizing, participatory research contributing to understanding of individual, family, and community wellbeing.(11) In addition, there is an urgent need for research contributing to development of policies increasing health equity for FNMI people.(12) Alberta has the highest Métis population in Canada, where over 114,375 people live within six regions, and the only designated Métis land bases in Canada, comprising over 1.25 million acres of land.(13) This community-based pilot study took place in the MNA-Region 3 (the southernmost part of the MNA), within the city of Calgary, AB (a large urban centre > 1.3 million people). The purpose of this community-based participatory pilot study was to explore links between health, spirituality, and wellbeing within the Métis Nation of Alberta (MNA)-Region 3.

Methods

Three theoretical frameworks grounded our research: (1) Ways of knowing, a belief in the connectedness of all things (14, 15); (2) Participatory action research (PAR), influenced by Lewin (1890-1947) who questioned societal change without community involvement, and emphasized colonization's harmful effects (16), and founded by Freire (1921-1997) who placed participants at the centre of the research processes (17, 18), and Borda (1925-2008), incorporating local knowledge into power for change(18); and (3) the International Association of Public Participation (IAP2) Public Participation Spectrum, used in the first author's previous patient-oriented research.(19) As individuals move toward the right of the

spectrum (from being informed to consulted, from involved to collaborating), they become the final decision-makers. See Figure 1.

Patient-Oriented Research

All but the first author of this manuscript are members of the MNA – Region 3. The first 2 authors met with local MNA-3 elected leaders, discussed potential research topics, and how to conduct the research. Community members, informal and elected leaders, and an Elder from the MNA-Region 3 were invited to participate in focus groups at an MNA-Region 3 mixer (a large monthly social event) in October 2018; focus groups occurred in November 2018 and January 2019. Each focus group lasted approximately 2 hours, informed consent was obtained, food was provided, and each participant received a \$50.00 gift certificate as a thank-you. During focus groups, a community member and research team member took notes, which were referred to throughout survey development. During the first focus group, participants (n = 7) discussed areas of interest in relation to health, spirituality, and wellbeing, and identified meaningful survey questions. At the second focus group (n = 6), two participants from the first focus group were absent, but two new participants attended, further discussion ensued, and a draft survey was developed. A qualitative structured survey was approved by the leadership of the MNA-Region 3 in early February 2019. See Figure 2. Data collection occurred face-to-face at two MNA-Region 3 mixers in February and March 2019. **Data analysis**

Surveys (N = 29) were de-identified, scanned, and transcribed into word documents. In April 2019, we engaged with a working group of community members, informal and elected leaders, and an Elder (n = 7) in participatory coding and theme development.(20, 21) Survey data were laid out on a large table on separate pieces of paper, where participants picked up those that held the most meaning to them, discussed why, and placed them in piles,

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developing themes. During this focus group, Doreen Dumont/Vaness Bergum, MNA-Region 3's Elder spoke.

I come to you today to share the spirit, wisdom, and culture of our Métis heritage...In the 1940's and the 50's it was against the law to speak our Michif language, against the law to gather as a family or have community dances. Every summer in July, my parents would place willows and a canvas over the box of the truck and load their family of ten. Clothing, bedding, food, cooking supplies, and we headed off to Lac St Anne Pilgrimage...We were taught to pray through the love of our parents. This was also a time for friends and relatives to visit and share their language, fish, dried meat, bannock, and stew. Loving times with people of Métis gathered...They would walk for miles to be with their own people...I have memories and visions of my parents walking in the healing waters of Lac St Anne. The spirit of Lac St Anne will remain in my heart forever. No one can take the spirit of God from us. I have shared Lac St

Anne with my children and my grandchildren. (Doreen Dumont/Vaness Bergum) The place of the healing waters at Lac St Anne in community wellbeing was confirmed, as was the importance of meeting together regularly to participate in activities meaningful to the community including spiritual, cultural, educational aspects of health and wellbeing. This data analysis process and initial results were shared, discussed, and affirmed with enthusiasm at an MNA-Region 3 mixer in May 2019.

Ethics approval

We developed a research proposal with local MNA-3 elected leaders, a formal research agreement was signed, and CHREB ethical approval was obtained (REB18-0433).

Results

Surveys were completed by 29 participants, members of the MNA – Region 3, ranging in age from 28 to 80 years. The top 3 areas of interest were: (1) passing on Métis traditions and

 culture to younger generation (76%); (2) blending different cultural and spiritual practices (72%); and (3) cultural immersion/traditional knowledge/learning in community (66%). During co-analysis of survey data, an overarching theme of Connection and 4 corresponding themes (to Métis ancestry, to community, to land, and to spirituality), were identified. See Table 1.

Connection

Participants described health, spirituality, and wellbeing as "very much connected, more than we accept" (C – 024); "spirituality is the nucleus or focus which keeps all others in balance and sync" (C-004). Maintaining balance was central to wellbeing, "I find if you are not of a sound mind then your body will never 'fully' be healthy. Our health starts internally and mentally" (C-023). Connection between addiction and spirituality was noted, "Most people that have addictions are hurting inside and they are trying to fix it." (C-008). Health, spirituality, and wellbeing, "totally connected, the difficulty is western culture asks us to work and live leaving emotions and spirituality out of the picture, then we suffer consequences of mental health issues." (C - 002)

Connection to Métis ancestry

Tension between choosing to hide or disclose Métis ancestry was identified: "If I hide my Métis identity my spirit and my health suffer. If I share my Métis identity with mainstream society, I suffer racism" (C-002); "They tell me to say I am French as the Métis are sometimes looked down on but I am who I am" (C-001). Some experienced early awareness of Métis identity, "Grounded! Always have known who I was and my family and Métis culture" (C-022), while others did not. Experiencing racism occurred in conjunction with experiences of belonging, "The more I share my identity, the more others are accepting of me. The more I hide my identity, the more untrusting (confused) people can be of me" (C-014). One noted "If the medical community is aware that I am Aboriginal there is obvious discrimination" (C-021), while another described "protecting yourself from racist people. You put up a shield of armour to protect your senses hearing, sight and heart" (C-003).

Connection to community

 Health, spirituality, and wellbeing "they're all connected through my community" (C-021); "once I knew I was Métis and met more Métis I felt like I had come home" (C-008); "I am very new to the community, so being part of this community really brings me joy-which helps with my wellbeing" (C-016). Effects of trauma on individual and community healing and wholeness were identified, "I am highly interested in how past trauma can be passed down to younger generations and how we can break the cycle of addiction/abuse" (C-023).

Connection to land

For many, connection to land and community contributed to health and wellbeing, but had been interrupted, "want to see the harvesting rights given to the Métis the same as the First Nations. Grandmother was robbed of her land by the government" (C-030). Connection to land included passing on historical knowledge and traditions in a community context. Connecting with the land involved historical understanding and current adaptation of sustainability such as harvesting fish with nets, "how much more beneficial is it with sustainable harvesting to use rod and line? My ancestors were scouts and interpreters- I am honoured with the example they have left for me to follow" (C-004).

Connection to tradition

Connection to Indigenous and Roman Catholic traditions of wellness and healing included actions, practices, and rituals: "became a eucharistic minister in my church and Lac St. Anne pilgrimage" (C-003); "becoming a pipe healer/storyteller" (C-024); and blending "traditional and non-traditional healing and health care" (C-022). "When I feel spiritually connected, I feel better, physically look better and feel grounded" (C-014).

Our Creator, Great Spirit & Lord is viewed, pondered, worshipped by all.

Where for art Thou? everywhere, in everything.

The Far beyond words I have another name for the way in which, we are never alone. Thee Orchestrator of Infinity rhymes with Divinity, while embracing every heartbeat of every creature, Poetry in motion, Loves our devotion. (Travis Ronald)

Interpretation

In this community-based participatory pilot study we co-developed and distributed a qualitative structured survey to explore health, spirituality, and wellbeing within the MNA-Region 3. An overarching theme of connection emerged, to Métis ancestry, to community, to land, and to tradition. The place of community pilgrimages to sacred sites and cultural tours to historical sites were confirmed as contributing to individual, family, and community wellbeing and healing. Meeting together regularly to participate in meaningful community activities including spiritual, cultural, and educational aspects of health and wellbeing was also recommended.

Some participants always knew they were Métis, while others discovered it later in life. There existed tension regarding choosing to reveal identity; passing as "white" had been used as a survival tactic in the past, which could contribute to decreased connection with spirituality.(22) At a two-day 2018 federal government emergency meeting regarding the high number of FNMI children in care, key causes of Métis children in care included ignorance among child welfare authorities about who Métis people are.(9) Participants described health, spirituality, and wellbeing occurring in community, and although individual and community wholeness and healing were described, so were effects of trauma, and the need to break intergenerational cycles of addiction/abuse. Participants talked about the importance of telling their stories. Managing intergenerational trauma, resultant health disparities, and ongoing structural violence requires protective buffers: (1) decolonizing strategies such as self-determination and self-governance; (2) identity formation such as

cultural engagement, healing practices, and spiritual ceremonies; and (3) culturally-adapted interventions such as incorporating information on acculturation, colonization, and historical trauma.(23) On June 27, 2019, the MNA signed the first self-government agreement between a Métis nation and the Government of Canada, with a clearly-defined process to implement Métis jurisdiction in core areas of self-government.(24)

 Participants described wanting to reconnect with land and seeking reparation for wrongs done in their families and communities. The Canadian government issued Métis scrip (Halfbreed scrip), providing the appearance of Métis land entitlement, but instead facilitating wealth accumulation and western settlement (Tough and McGregor 2011). The Canadian government has moved slowly regarding land claims and reconciliation with FNMI people, and specifically for Métis title claims, which are justified and strong, there has been little action.(25) Métis people have faced discrimination due to their mixed heritage, each generation has experienced challenges, with resultant resilience, determination, and independence, and a strong, adaptable work ethic; current challenges include reconnecting with Métis identity, culture, and tradition.(26) For Métis people, moving forward toward healing and wellbeing includes recognition of the intergenerational effects of trauma, and the essential place of family and community.

Limitations of our pilot study were the small sample size in one geographical area therefore, findings may not be generalizable to the entire MNA-Region 3. There is much diversity throughout Métis communities, and priorities contributing to wellbeing may differ in unique ways, therefore we recommend further face-to-face survey distribution in collaboration with community members, informal and elected leaders, and Elders throughout the remaining communities in the MNA-Region 3. Hierarchical development and transfer of knowledge is not ethical or advantageous, however, community-based participatory research can promote equity and justice and increase wellbeing.(27, 28) FNMI people are strong and

resilient, with a holistic world view that has potential to contribute to the overall health and wellbeing of all Canadians.(29)

Lessons learned in our patient-oriented community-based pilot study included the following. Participants in our pilot study described the importance of telling their stories, of sharing who they are, and persisting in pursuing wellbeing for themselves and their communities. Engaging the MNA – Region 3 community in co-developing, distributing, and analysing a qualitative structured survey presented opportunity for: (1) Increased individual and community knowledge Métis identity/ancestry and health, spirituality, and wellbeing; (2) increased research capacity within the MNA – Region 3; (3) increased collaboration in community-led identification of priorities for community-initiated funding and policy development; and (4) contributing to increased individual, family, and community wellbeing within the MNA – Region 3 and beyond. We recommend engaging in Métis-guided community-based research across the remaining 5 regions in the MNA.

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Theme; subthemes	rting primary themes Representative quotes		
Connection	When my spirit loses a sense of purpose, lack of love, too much stress, life distractions then my health starts to decline and my whole sense of well-being suffers adversely. We must feed all: mind, body, soul, spirit, and love! (C-013)		
	Take medicine and food that you grow. Be happy and don't dwo on negative people. Walk away lonely to people that will hurt you. (C-001)		
	I learned of the medicine circle many years ago. It is an Aboriginal approach to the way that there are four directions in life, North, South, East & West. There are also four major categories for humans to consider & prioritize. Mental, Emotional, Spiritual, & Physical. I have been told and consider to be a very valuable way of looking at things Balance all fou of these areas equally. If you are too emotional, or too spiritual, your other areas will be less fulfilled causing you to be unbalanced. Just as the wind is under both wings of every bird, there is a natural balance to admire, and to strive to achieve in your own ingredients of life. $(C - 020)$		
	Addiction and spirituality, both are very deep in nature and effe One is dangerous and the other is strengthening. In other word opposites yet competing. Spirituality and cultural history as a to for healing. One needs something to believe in. To rely on both an ongoing nature. Something that should deepen over the years as one grows older and more dependent on beliefs as their physical activity decreases and needs something to replace it. (C 015)		
	A need for continued support for recovering alcoholism and dru abuse. Need place to go for support groups. List of people to ca when think I am going to relapse. (C-030)		
	When I am not in touch with my spirit, I feel unwell. (C-012)		
	When you are healthy spiritually you are usually healthy. (C-01		
1. Connection to Métis Ancestry	My grandfather hid from our family that we were Métis because of the prejudice that existed against Métis back in the 1920's when he started his family near Winnipeg, MB. I didn't find out that I was Métis until I did some research into my family tree in 2003. It took me over a year on my own to put together the genealogy but the family history and stories I found to be amazi and explained a lot to me of who I was and why I am the way I am. (C-010)		

	Once we learnt about our Métis status we have been learning, trying to understand why my parents never talked about it. My mom who is now nearly 90 years old has started to tell us a bit more. (C-006)
	Though some would say that Métis people can usually hide their identity, this hiding does nothing to promote health, spirituality, and wellbeing. Being Métis lots of people tend to believe that I am not a productive worthwhile human being. Sometimes it is easier to fall into the trap of what people expect instead of standing up for what I truly believe and what I really am! (C-030)
2. Connection to Community	I believe that addressing the wholeness of a person and of a community is the only way that we can address root causes of the intergenerational and direct trauma that cause indigenous people to remain on the margins of society. These traumas, combined with systemic racism trap us in lifestyles where our choices become very limited and the cycles of hopelessness are perpetuated. Our culture and language are who we are and who we always have been. They are our spirituality, our religion and our governance. They are integral to our ability to heal because without them neither the individual nor the community can reclaim our wholeness. Until we are whole we cannot see other than what we have already seen. (C-017)
3. Connection to Land	Can we teach cultural history and practices to foster spirituality in a way "providing soul food" for one's spirit. If we have gaps in our cultural history and identity can we for spiritually whole and fulfilled? Passing on Métis traditions and culture to younger generations- Feel this is important to foster a younger healthy thriving Métis generation. This can take through numerous modalities: music, art, song, games, etc. representing of traditional cultures. Would be amazing to have cultural "tours" to key Métis historical sites via community bus. Guided informative and a journey of healing, understanding and cultural immersion "retreats"- spiritual, cultural, educational that can be informative, experiential and healing as a collective. (C-013)
	I have strong feelings that we as a nation of Métis people need to reconnect with the land to be self-sufficient and live off the land to find better health nutritionally but also mentally and the work to do so creates physical health. Land claims- I hope that as a nation we can get our land back so we can continue to become more self-sufficient and provide healthy food for ourselves. (C- 019)

	We belong to the land and without our connection to the land nature we suffer. We are community spirited and without our kinship we are lost. Strong culture = strong spirit. (C-002)
	Body movement, breath work, connection to land, prayer, smudge, healthy food, and being connected to heart is and has played a major key in my current health. (C-031) I go to church most weeks and I believe this helps keep a pers happier through the good times and the bad times that this life dish out. My Catholic religion helps me with spirituality and n Métis background helps me to find this spirituality in the great outdoors out in the environment and wilderness. (C-010)
4. Connection to Tradition	I believe having a connection with a higher power gives peop reason to live and a sense of moral responsibility. Our general wellbeing is constantly affected by our daily decision making our daily decision making can be directly linked to our spiritu or lack thereof. (C-019)
	I walk with the lordcoming to know Jesus as my Lord and allowing him to be part of my life- He healed my mind body a soul. (C-008)
	My Catholic religion provides me with my God and my God the Creator. (C-010)
	How best can blending different cultures and spiritual practice bridged to honour and respect both? (C-013)
	Smudging is good and helps me feel good. Also sweats, prayi and keeping in touch with my spirituality helps me maintain a good perspective on life. (C-011)
	I pray to many gods: JC, Creator, Quan Yin, Buddha, Angel Spirits, Animal Totems. Gives greater sense of totality and connectedness to all having something to offer. I pray, drum, smudge, practice yoga, read about angels after life, traditional practices and rather choose what works. (C-013) I attend Christian church and blend my spiritual knowledge an thoughts with the moral ideals and teachings at the church. If there were a Métis church that imparted traditional teachings, would attend that. (C-019)

IAP2'S PUBLIC PARTICIPATION SPECTRUM



The IAP2 Federation has developed the Spectrum to help groups define the public's role in any public participation process. The IAP2 Spectrum is quickly becoming an international standard.

INFORM	CONSULT	INVOLVE	COLLABORATE	EMPOWER
To provide the public with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions.	To obtain public feedback on analysis, alternatives and/or decisions.	To work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered.	To partner with the public in each aspect of the decision including the development of alternatives and the identification of the preferred solution.	To place final decision making in the hands o the public.
We will keep you informed.	We will keep you informed, listen to and acknowledge concerns and aspirations, and provide feedback on how public input influenced the decision. We will seek your feedback on drafts and proposals.	We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how public input influenced the decision.	We will work together with you to formulate solutions and incorporate your advice and recommendations into the decisions to the maximum extent possible.	We will implement what you decide.

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Figure 1: International Association of Public Participation (IAP2) Public Participation Spectrum.

Note: Permission was obtained to copy, reproduce, and publish the International Association for Public Participation (IAP2) Spectrum of Public Health from the IAP2 on behalf of the IAP2 International Federation.

Study ID_____

Date of Birth: _____

Members, leaders, and Elders of the MNA-Region 3 have met together to develop these questions/questionnaire/survey.

Please check off areas of interest to you:

Prison ministries
Addiction and spirituality
Blending different cultural and spiritual practices
Cultural immersion/traditional knowledge/learning in community
Spirituality and cultural history as a tool for healing
Elder's role in healing (physical and spiritual)
Reconciliation and forgiveness (government and church)
Passing on Métis traditions and culture to younger generation
Nutrition and mental/physical wellness (for example Diabetes/Mental health)
Land claims and harvesting rights
Learning and preserving language
Pilgrimages to sacred sites

Please use the next few pages to write about any of the topics you checked off above.

Additional Questions:

- (1) Are there ways that you see your health, spirituality, and wellbeing as connected?
- (2) What are the most important things you have done in your lifetime that have impacted your health?
- (3) Are there ways that your Métis identity affects your health, spirituality, or wellbeing?
- (4) How do you blend different religious or spiritual practices to maintain your health, spirituality, or wellbeing?
- (5) Are there any other areas you want to write about related to health, spirituality, and wellbeing?

Figure 2: Qualitative structured survey.

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GRIPP2 Short Form

ection and Topic	Item	Page No.
1. Aim	The purpose of this community-based participatory pilot study was to explore links between health, spirituality, and wellbeing within the Métis Nation of Alberta (MNA)-Region 3.	2
2. Methods	Patient-Oriented Research All but the first author of this manuscript are members of the MNA – Region 3. The first 2 authors met with local MNA-3 elected leaders, discussed potential research topics, and how to conduct the research. Community members, informal and elected leaders, and an Elder from the MNA-Region 3 were invited to participate in focus groups at an MNA-Region 3 mixer (a large monthly social event) in October 2018; focus groups occurred in November 2018 and January 2019. Each focus group lasted approximately 2 hours, informed consent was obtained, food was provided, and each participant received a \$50.00 gift certificate as a thank-you. During focus groups, a community member and research team member took notes, which were referred to throughout survey development. During the first focus group, participants ($n = 7$) discussed areas of interest in relation to health, spirituality, and wellbeing, and identified meaningful survey questions. At the second focus group were absent, but two new participants attended, further discussion ensued, and a draft survey was developed. A qualitative structured survey was approved by the leadership of the MNA-Region 3 in early February 2019. See Figure 2. Data collection occurred face-to-face at two MNA-Region 3 mixers in February and March 2019.	3
3. Study results	Surveys were completed by 29 participants, members of the MNA – Region 3, ranging in age from 28 to 80 years. The top 3 areas of interest were: (1) passing on Métis traditions and culture to younger generation (76%); (2) blending different cultural and spiritual practices (72%); and (3) cultural immersion/traditional knowledge/learning in community (66%). During co-analysis of survey data, an overarching theme of Connection and 4 corresponding themes (to Métis ancestry, to	4

	reconnecting with Métis identity, culture, and tradition.(26) For Métis people, moving forward toward healing and wellbeing includes recognition of the intergenerational effects of trauma, and the essential place of family and community.	
5. Reflections/critical perspective	Lessons learned in our patient-oriented community- based pilot study included the following. Participants in our pilot study described the importance of telling their stories, of sharing who they are, and persisting in pursuing wellbeing for themselves and their communities. Engaging the MNA – Region 3 community in co-developing, distributing, and analysing a qualitative structured survey presented opportunity for: (1) Increased individual and community knowledge Métis identity/ancestry and health, spirituality, and wellbeing; (2) increased research capacity within the MNA – Region 3; (3) increased collaboration in community-led identification of priorities for community-initiated funding and policy development; and (4) contributing to increased individual, family, and community wellbeing within the MNA – Region 3 and beyond. We recommend engaging in Métis-guided community-based research across the remaining 5 regions in the MNA.	9
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