LISTEN, LEARN, AND UNDERSTAND: AN EXAMINATION OF THE INFLUENCE OF CULTURE ON BODY WEIGHT, PHYSICAL ACTIVITY, AND DIET IN URBAN ABORIGINAL YOUTH.

A Thesis submitted to

The College of Graduate Studies and Research in Partial

Fulfillment of the Requirements

for the Degree of Master of Science

University of Saskatchewan

Saskatoon, Saskatchewan, Canada

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ABSTRACT

Urban Aboriginal youth are one of the fastest growing populations in Canada (Statistics Canada, 2008). There is growing concern with the increasing rate of overweight and obesity among Aboriginal youth (Reading, 2009). Although this unique group is quickly growing, and possibly experiencing more ill health than non-Aboriginal youth their voices are currently absent in Aboriginal health literature. Drawing on the voices of urban Aboriginal youth to understand their perspectives is important for the promotion and enhancement of overall health (RCAP, 1996). One specific topic absent from the literature is the influence of culture on body weight, physical activity, and diet for urban Aboriginal youth. (Gittelsohn et al., 1996; Kumanyika, 1993; Marchessault, 1999; Thompson, Gifford, & Thorpe, 2000; Willows, 2005). Culture is seen as the beliefs, behaviours, norms, attitudes, and social arrangements that form patterns in the lives of members (LeCompte & Shensul, 1999, pg 21). The purpose of this study was to examine the influence of culture on body weight, physical activity, and diet for urban Aboriginal youth.

This study used the qualitative methodology of focused ethnography. The study setting was an urban Aboriginal high school in Saskatoon, Saskatchewan, Canada. Fifteen participants (11 females, 4 males) took part in this study. Participants were between the ages of 14-21, with a mean age of 16.73. Methods of data collection included semi-structured interviews, informal conversations, talking circles, and participant observation. The researcher spent 10-15 hours a week for eight months on site in the research setting.

In this study four themes describe the influence of culture on body weight, diet, and physical activity. These themes were: (i) acceptance of our bodies, (ii) playing together, past and present, (iii) traditions and sharing, and (iv) the struggle. The young urban Aboriginal participants in this study believed that a healthy body weight comes in a variety of sizes. There

was a general acceptance in the diversity of healthy body weights and sizes. Group physical activity and competitive activity was favoured among participants. Traditional physical activities such as dancing, hunting, and fishing were cited as important by all participants. Participants believed traditional foods to be healthy and desirable, and those who reported eating traditional foods less frequently desired to eat them more often. Food sharing networks consisting of friends and family were reported as a way to address food insecurity and acquire traditional foods from the participants' home reserves. In this study barriers to physical activity and diet for urban Aboriginal youth were income, location or residence, and transportation. Participants attempted to overcome them when it was possible, which highlights a resiliency among urban Aboriginal youth.

In conclusion, this study offers valuable information on the influence of culture on body weight, physical activity, and diet for urban Aboriginal youth. Participants in this study engaged in a variety of traditional and cultural activities. These activities increased the healthy eating habits and physical activity levels of the participants. Thus, cultural engagement may be a health enhancing mechanism for urban Aboriginal youth in Canada.

ACKNOWLEDGEMENTS

"A small group of thoughtful people can change the world. Indeed, it's the only thing that ever has", said Margaret Mead, a founder of ethnography. Over the past two years I have been fortunate to work with many people who dedicate their time to making positive changes in our community through their research, teaching, and volunteer work. These thoughtful individuals have helped me develop my ability to contribute to our community, and supported my growth both professionally and personally.

The most influential person in my journey has been my supervisor, Dr. Louise Humbert. Thank you for the patience, honesty, guidance, and encouragement you have shown me. The time you dedicated to mentoring me has helped me become a better student and teacher. I would also like to thank members of my committee, Dr. Karen Chad, Dr. Carol Henry, and Dr. Kent Kowalski who have offered insightful comments and helpful criticism. Thank you also to my external examiner, Dr. Sylvia Abonyi, who offered fresh perspectives to my work. I would also like to extend my gratitude to the University of Saskatchewan and the Canadian Institute of Health Research for the funding I received.

Finally, I would like to thank Oskayak High School and the Greater Saskatoon Catholic School Division for supporting this research project. Oskayak High School welcomed me into their wonderful school and made this project enjoyable and memorable. In particular, I would like to thank the 15 young men and women who shared their knowledge and experiences with me. Lastly, I would like to express my gratitude to the teachers, staff, and administrators who facilitated this project.

DEDICATION

I would like to dedicate this thesis to my grandfather, George Bloor, for instilling a love of learning in me at a young age. Your dedication to education and lifelong learning are an inspiration. Your constant affirmation continues to help me reach my goals.

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DEFINITIONS

Aboriginal: Aboriginal people in Canada comprise the First Nations, Inuit and Métis people. These distinct groups have unique heritages, languages and cultures. (Statistics Canada, 2008).

Community: Represents a sense of belonging together or a group of individuals who have particular characteristics in common (Canadian Institute of Health Research, 2005). A school may be a community (Harrison, 2001).

Culture: Culture is seen as the beliefs, behaviors, norms, attitudes, social arrangements, that form patterns in the lives of members (LeCompte & Shensul, 1999, pg. 21).

Poverty: In Canada poverty is defined and measured by income and basic needs. Statistics Canada has always measured poverty by low income cut off, which has changed over time and continues to change as wages and income change (Statistics Canada, 2010). Human Resources Development Canada has added a measure of poverty to the wages and income measure. This method based on the cost of basic supplies and services. If income is below the low-income cut off and/or if basic needs are not being met than an individual or family is in poverty (Statistics Canada, 2010).

Reserve: The term reserve refers to lands owned by the Crown and held in trust for the use and benefit of First Nations, for which they were set apart (Assembly of First Nations, 2007).

Traditional Activities: Traditional activities refer to the activities and events participated in and established by Aboriginal people. Common traditional activities are feasts, pipe ceremonies, powwows, round dances, smudges, and customary arts and crafts.

Traditional Physical Activity: Common traditional physical activities include dancing, drumming, hunting, and gathering. Traditional games such as bone games, high kick, snowsnake, lacrosse, and archery are also traditional forms of physical activity.

Traditional Food: The general category used to describe all of organic plant and animal nutrients that ensure and maintain the health of Aboriginal people. In Canada, common traditional foods are fish, wild game, berries, and other gathered vegetables, fruits, and grains (Reading, 2009)

CHAPTER ONE

1.1 Introduction

Urban Aboriginal youth are the fastest growing population in Canada (Statistics Canada, 2008); however, they are a relatively under studied group (Waldram, Herring, & Young, 2006; Willows, 2005). The voices of urban Aboriginal youth and the perspectives and views they have regarding health issues are currently absent from the literature examining Aboriginal health (Urban Aboriginal Peoples Study, 2010; Fleming, 2006). Specifically, there is a gap in the literature on the influence of culture on body weight, diet, and physical activity in urban Aboriginal youth (Gittelsohn et al., 1996; Kumanyika, 1993; Marchessault, 1999; Thompson, Gifford, & Thorpe, 2000; Willows, 2005). Drawing on the voices of urban Aboriginal youth to understand these beliefs and behaviours is important for the promotion and enhancement of overall health and healthy body weights (RCAP, 1996).

In order to understand the beliefs and behaviours of this unique cultural group it is necessary to use a method that is guided by the concept of culture (Mueke, 1994). Previous studies exploring culture and different aspects of health, such as diet and physical activity, have used ethnographic methodology (Gittelsohn et al., 1996; Hunter, Logan, Goulet, & Barton, 2006; Thompson et al., 2000). Ethnography is a qualitative method that generates rich and detailed data that describes a culture and how a cultural system influences behaviours and beliefs (Bernard, 1994; Thompson, 2000). Peoples' understandings of health issues are embedded within personal experience and culture based meanings, and ethnographic methods help unlock these meanings and gain insight into relevant strategies to address health issues (Gittelsohn et al., 1996). Another

important attribute of ethnography is that it is a method that is seen as acceptable by Aboriginal people, as it seeks to respect and understand lived experience (Clark, 1997).

Since ethnography studies culture and cultural influences it is necessary to understand what culture is. There are many different definitions of culture, but for the purpose of this study I have chosen to use LeCompte and Shensul's (1999, pg 21) definition, "culture is seen as the beliefs, behaviors, norms, attitudes, social arrangements, that form patterns in the lives of members". In this study culture was viewed at as beliefs and behaviors, which persist over time. Beliefs have been formed by the participants' feelings, thoughts and what they believe to be true; whereas, behaviors have been determined by their actions. Research that describes the beliefs and behaviours of specific populations allows for the development of strategies for health promotion that are tailored to the group's needs and preferences and to the setting in which they live (Gittelsohn et al., 2010).

1.1.1 Statement of Purpose & Research Questions

The purpose of this study was to explore the influence of culture on body weight, diet, and physical activity for urban Aboriginal youth. The research questions that framed the study were:

- 1) What influence does culture have on healthy body weight?
- 2) What influence does culture have on physical activity?
- 3) What influence does culture have on diet?

1.2 Genesis of the Study





Figures 1 and 2. Oskayak High School

I walked up the sidewalk, alongside the busy Saskatoon street, to Oskayak High School. Aside from the sign in front that had a medicine wheel and the aphorism "Listen, Learn, and Understand To the Grandmothers and Grandfathers" it looked, from the outside, like a typical Canadian urban high school. It was a sunny autumn day, and the school's Canadian flag was swaying out front. I nervously opened the door, and inside was a small hallway with stairs leading up to the foyer of the school.

As my eyes adjusted from the bright light outside to the dimly lit hall it became obvious that I was not in a typical high school. The walls were painted with Aboriginal art, tee-pees, and medicine wheels. On one wall were the cultural values that the school promoted: faith, family, humility, thankfulness, sharing, and respect. As I climbed the short staircase I came into a well lit communal area. Everywhere my eyes wandered—up, down, and left to right, I saw representations of First Nations and Métis culture. On the floor inlayed in the linoleum was a large circle with four quadrants of different colors. The glass cases above proudly presented

pipes, art, and pictures of elders. To the left was a wall size monthly calendar reminding the students of when the fall powwow was, and what time they leave for sweat lodge. To the right was the office with sleepy teenagers waiting to sign in late, as they had not made the adjustment from the lazy days of summer to the early mornings of school quite yet.

I felt out of place. I was in a new city, at a school I was not familiar with, and I was white. Although I had worked comfortably alongside Aboriginal youth for the past three years with Aboriginal Sports and Recreation B.C., it was apparent that I was not at the Friendship Center in Nanaimo, at a gym on Cowichan Reserve, or on a soccer field with Tseshaht youth. Nor were there the familiar faces that I knew and relied on when working with Aboriginal peoples back home. It might have been at that moment, feeling completely out of place, that I first grasped the value of community and relationships when working with Aboriginal peoples.

I then proceeded to navigate the halls in search of the gym, a place that I had always felt comfortable in, to find a teacher named Jacqueline Lavallee. I had been put in touch with Jacquie because she was the physical education teacher at Oskayak, and an award winning Aboriginal athlete and coach. I had wanted to start working with Aboriginal youth in my new community, and possibly work with Aboriginal youth for my Master's thesis. I recall that my nervousness increased as the sounds of bouncing balls and music came closer; an opposite effect than I was used to. I was about to meet a woman who had eminent status among the Aboriginal and basketball community in Saskatchewan. Thankfully, within minutes of meeting and talking with Jacqui the trepidation that I had felt melted away. We easily conversed about the many commonalities we shared including our passions, basketball and working with youth.

Jacquie told me about *Team Spirit*, an Aboriginal girls basketball program she coached. I was very interested in this program, and she invited me out to coach with her in the spring. I then

inquired about the after school programming they had at Oskayak, wondering if there was any way to get involved that fall. She explained that many of the students liked volleyball, and it would be nice to have someone come in and run a volleyball program. The following week I started an afterschool volleyball program at Oskayak. From that week onward I became a regular at Oskayak.

The following spring I began to formulate some potential questions that I might like to investigate for my thesis based on my observations and experiences at Oskayak. During my time coaching and volunteering I became curious about how culture influenced the young people I worked with. The students lived in a large city, but it was evident that many had strong cultural ties. I wondered if they thought about physical activity, diet, and body weight similarly to other youth who lived in the city? Did they have similar patterns of thought as Aboriginal youth who lived on-reserve? Or was it more complex, did they have their own unique culture? It was these questions that led me to begin examining the literature around urban Aboriginal youth and culture.

1.2.1 Description of the Setting

Oskayak is a relatively small urban high school, with about 200 students. Like many other high schools that have a predominantly Aboriginal student body attendance and drop out rates are the greatest challenges teachers and administrators face. In an effort to address these challenges Oskayak runs on a system that provides four opportunities for students to register each year. This gives the students multiple chances each year at successfully attaining credits. In addition to having typical high school age students, Oskayak enrolls students who may be older or younger in an effort to provide as many urban Aboriginal youth a high school education as possible.

The school stresses personal growth and accomplishment by enabling to the students to experience academic success, personal development, and healing. Students who attend Oskayak value culture and realize its importance in the learning process. This is achieved by engaging students in a variety of activities that focus on historical and cultural aspects of the Plains Cree people. For example, students can participate in smudging, feasts, sweat lodges, and powwows. Oskayak also encourages cultural engagement by teaching students about maintaining balance in all aspects of life: mind, body, emotion, and spirit.

In addition to providing cultural learning opportunities, Oskayak also offers a daycare for the children of students, two meals a day, and a variety of physical activity options. The school daycare ensures that young Aboriginal parents have the same opportunity to complete high school as their peers. The school cook prepares a cost free nutritious breakfast and lunch for all students each day. This allows the students to focus on their academics rather than food attainment. The cafeteria is also a gathering place, where all grades get together each day to enjoy their meals with one another. Oskayak has volleyball teams, soccer teams, a running club, a hockey academy and a weight room with new high quality equipment and machines. The hockey academy offers students the opportunity to learn hockey skills, leadership, teamwork and fitness in a cultural setting. The gym is open every day before school, at lunch, and afterschool so that students can get together and play in a safe environment.

1.3 Literature Review

The following review of literature begins with a section highlighting the diversity within Aboriginal peoples in Canada; this serves to illustrate the importance of local and culturally specific knowledge. Next, the prevalence and associated health implications of overweight and obesity will be examined. This section's purpose is to reveal how immediate the need is for information that can help enhance healthy body weights. The following sections discuss the key studies examining the behaviors and beliefs of Aboriginal youth on body weight, physical activity, and diet.

1.3.1 Culture and Diversity within Aboriginal People

Cultural differences within Canadian Aboriginal peoples are related to Aboriginal ethnicity (First Nations, Métis, Inuit and those with or without registered treaty status), geography (remote, rural, on-reserve, urban), and jurisdiction (federal, provincial, tribe, band) (Smylie & Anderson, 2006). When research on Aboriginal people's health is generalized it masks the rich diversity of social, economic, political, and environmental circumstances that form important variance in health and healing strategies in Aboriginal communities (Waldram et al., 2006). These distinctions between Aboriginal people need to be considered when conducting 'Aboriginal health' research, as often the term 'Aboriginal health' is overused due to convenience (Waldram et al., 2006).

In Canada, more Aboriginal people now live in urban centers than on reserves; the urbanization of Aboriginal people is especially apparent in Western Canada (Hanselmann, 2001). Saskatoon has the second highest concentration of Aboriginal peoples in Canada (Statistics Canada, 2008). The 2006 census showed that 15% of the population in Saskatchewan is Aboriginal (Statistics Canada, 2008). Additionally, the 2006 census showed that half of the

Aboriginal population in Saskatoon is under the age of 24 (Statistics Canada, 2008). Due to this large and young urban Aboriginal population in Canada there are unique health challenges emerging and an increased need in cities, such as Saskatoon, for culturally appropriate services and programs (Waldram et al., 2006). Health data of all types shows that the least is known about non-status Aboriginal people and Métis people living in urban areas (Young, 2003). This lack of information greatly affects the development of health enhancing, culturally appropriate programs and opportunities.

1.3.2 Prevalence and Associated Health Implications of Overweight and Obesity

There is growing concern with the increasing rates of overweight and obesity in all Canadians; however, the concern is higher for Canada's Aboriginal population (Tremblay, Perez, Ardern, Bryan, & Katzmarzyk, 2005). High overweight and obesity rates among Aboriginal people are not unique to Canada: the same patterns are seen in the U.S.A, Australia, New Zealand, and the Pacific Islands (Garriguet, 2008).

In Canada all children and youth, regardless of ethnicity, are becoming increasingly overweight and obese (Davis et al. 2007; Rhodes & Ludwig, 2007; Shields, 2006; Willlows, 2005). However, Aboriginal children and youth are more overweight and obese than their non-Aboriginal counterparts (Assembly of First Nations, 2007). Willows (2005) examined the prevalence of obesity and overweight in Aboriginal children and youth by reviewing the studies available and determined that up to one third of Aboriginal children and youth are at risk for obesity. More recently two larger national studies published data on levels of overweight and obesity in Aboriginal children and youth. In 2007, the First Nation Regional Longitudinal Health Survey was conducted. It surveyed both rural and reserve First Nations communities across Canada and found that 28% of First Nations adolescents were overweight and 14% were

classified as obese (Assembly of First Nations, 2007). The second large national study, the Canadian Community Health Survey found that 16% of off-reserve Aboriginal youth were obese (Statistics Canada, 2004).

Obesity and overweight in young Aboriginal peoples is a relatively new health problem that has been linked to the change in diet and activity level over the past two generations (Young, Sevenhuysen, Ling & Moffat, 1990). The prevalence of obesity and overweight in Aboriginal youth is especially distressing considering the associated health implications. The catalog of diseases that correlate with childhood obesity include: cardiovascular disease, respiratory disorders, osteoarthritis, stroke, type-two diabetes mellitus, and certain cancers (Schwimmer, Burwinke, & Varni, 2003). Type-two diabetes mellitus is strongly related to obesity within the Aboriginal population in Canada (Waldram et al., 2006). The prevalence of type-two-diabetes in the urban Aboriginal population is double that of the non-Aboriginal population (Tjepkema, 2002). As age increases so does the risk of type-two-diabetes in Aboriginal peoples, especially for individuals who are overweight or obese (Bobet & Health Canada, 1998). By better understanding the predictors for obesity in Aboriginal peoples it is likely that reductions in childhood and adolescent obesity can be attained earlier, resulting in positive health changes later in life (Reading, 2009). Thus, it is important to work with Aboriginal youth to gain a greater understanding about their beliefs on healthy body weight.

1.3.3 Aboriginal Youth Beliefs Pertaining to Body Weight and Shape

Understanding the beliefs held by Aboriginal peoples regarding body weight and shape is an essential first step in enhancing healthy body weights (Davis, Northington, & Kolar, 2000; Gittelsohn et al., 1996; Kumanyika, 1993; Marchessault, 1999; Poudrier & Kennedy, 2008; Willows, 2005). When these beliefs are understood, strategies to enhance healthy body weights

can be developed. Yet, there are few studies that have investigated the beliefs and behaviors of Aboriginal youth on body weight and shape.

In regards to Canadian studies, Gittelsohn et al. (1996) studied the body shape perceptions of Aboriginal youth in an Ojibway-Cree community in Northern Canada. A set of figure outline drawings ranging from very thin to very obese were used to examine perceived body shape, body shape satisfaction, and ideals of healthiness across sex and age groups. This study had over 700 participants aged 10-19. The researchers found only 16% of the participants were satisfied with their current body shape and participants with a higher body mass index score were less satisfied and felt less healthy than people with lower body mass index score. Male ratings of healthy female body shape did not significantly differ from female ratings. However, the oldest age group chose significantly larger healthy male and female body shapes than the younger age groups. Interestingly, when compared to the non-Aboriginal population the Ojibway-Cree participants felt that larger body shapes were ideal, even though they were unhappy with their own body shape.

Hanley et al. (2000) also studied a rural First Nations community in Northern Canada. This study surveyed 450 Canadian Aboriginal youth aged 12-19 to determine the prevalence of obesity and its associated behavioral factors. One of the associated factors the researchers examined was body image. They found an inverse relationship between overweight status and the heaviness of the healthy female body image selected. The heavier female participants felt that a larger body was healthy. This finding might suggest that overweight Aboriginal females may have a skewed perception of a healthy body weight. Females may be more susceptible to negative body image, which highlights the need for research in this population.

Marchessault (2004) examined body shape perceptions and preferences in both urban and rural Aboriginal and non-Aboriginal girls and women in Manitoba. A total of 163 females (80 girls and 83 women) participated in the study; the mean age of the girls was 13.5 and the women's mean age was 38.9. Aboriginal participants (girls and women) chose drawings of larger body shapes to represent their current shape than non-Aboriginal participants. A higher proportion of Aboriginal girls than non-Aboriginal girls wanted to be thinner; there were no other significant differences between Aboriginal and non-Aboriginal girls. There were also no significant differences between geographic locations (rural and urban) regarding the participants' choices of the most attractive or healthiest body shape. The findings based on the girls' results suggest that there may be no differences between urban and rural Aboriginal female youth in body size preference and perception, but that Aboriginal girls from both geographical locations may be concerned about their current weight. There was a non-significant trend for the Aboriginal women to select heavier body shapes as most attractive for girls and healthiest for girls. This particular finding may suggest that Aboriginal women have a preference or acceptance of heavier body shapes for girls.

Fleming et al., (2006) investigated the body-related emotional experiences of young Aboriginal women in Saskatoon and found a general level of body satisfaction. Participants in this study also described how their culture held different beliefs on body size compared to mainstream White culture. Participants felt that their culture was more accepting of higher body weights, and in some cases discouraged them from being "skinny". Because of this difference in beliefs the young women experienced body image differently depending on if they were living in the city or on the reserve. When the participants were at their urban based school in a non-Aboriginal setting they felt heavier, however, when they were on the reserve they felt thinner.

Thus, conflicting culture emerged as a theme. This study illustrated that there are possible environmental and socio-cultural influences of body weight perception. One of the most important findings from this study was that the body-related emotional experiences of young urban Aboriginal women can be positive.

With regards to American studies, Rinderknecht and Smith (2002) looked at body-image perceptions in Native American youth age 5-18. When asked to identify their ideal body figure, younger children selected thinner figures than adolescents. Overweight youth and normal weight youth chose similar ideal figures. Results revealed that 41% of the boys and 61% of the girls expressed a desire to be thinner. Those expressing the greatest dissatisfaction were overweight girls, which is consistent with the literature. Weight dissatisfaction has been shown to increase with overweight status among ethnic groups and non-ethnic groups (Rinderknecht & Smith, 2002).

One of the largest studies on weight perception and practices was an American school based study with 13,000 participants (Story et al., 1994). Participants were First Nations youth living near or on a reservation in the United States. Forty-one percent of the adolescent girls reported feeling overweight, 50% were dissatisfied with their weight, and 44% worried about being overweight. Of the boys 68% were satisfied with their weight, but 22% worried about being overweight. When these groups were compared with similar populations of non-Aboriginal youth both Aboriginal males and females had greater body weight dissatisfaction.

All but one of the studies reviewed found that significant proportions of Aboriginal youth, especially overweight females, experience body size and shape dissatisfaction and a desire to be thinner. With the exception of one study, the findings on desired weight or shape showed that Aboriginal youth have similar desired shapes and weights as non-Aboriginal youth. It is

important to note that only two Canadian studies researching body image and body-related emotional experiences involved urban Aboriginal participants (Fleming, 2006; Marchessault, 2004). Fleming's study looked at girls' body-related emotional experiences and found a general level of satisfaction, while Marchessault found that urban female youth had higher levels of body size dissatisfaction when compared to non-Aboriginal participants. This inconsistency highlights the need for more research with urban Aboriginal youth. Furthermore, there are no Canadian studies that look at male urban Aboriginal youth and body weight or size satisfaction.

1.3.4 Aboriginal Youth Behaviors and Beliefs Pertaining to Physical Activity

A limited number of Canadian studies have investigated physical activity beliefs and behaviors of Aboriginal youth; two were large national surveys and others were community based studies. The national surveys tended to involve few intensive interview questions on type and frequency of physical activity, and do not look in depth at the complex reasons for physical activity behaviors. The community based studies usually employed more intensive methods, which provided a more detailed picture of beliefs and behaviors on specific Canadian Aboriginal communities (Young & Katzmarzyk, 2007). These community based studies are valuable, but their findings may not be transferable to a Canadian urban Aboriginal population because most were conducted in remote or rural communities.

A recent ethnographic study done in Northern Saskatchewan with Aboriginal women showed that the female participants valued physical activity and understood the role that physical activity played in health (Bruner, 2008). Four different age cohorts participated in this study: 15-24 years, 25-39 years, 40-54 years, and over 55 years. Many of the young women (15-24) stated that they were physically active and physical activity was fun. Half the young women (15-24) identified various sports such as volleyball, baseball, and swimming as physical activity, whereas

others described home-related activities such as cooking and cleaning. Reported barriers to physical activity for the youngest age cohort (15-24) were the lack of personal time to engage in exercise and childcare responsibilities. When asked what would get more people in the community active participants of all ages suggested team sports and other physical activities that could be done individually or in a group.

Another Saskatchewan based study was conducted by the City of Saskatoon (2004). The overall purpose of the study was to determine how to increase physical activity levels in the Aboriginal population. In this study Aboriginal community leaders participated in one-on-one interviews to gain information for the development of an Aboriginal program plan for community development and leisure services (Fast Consulting, 2004). A small piece of this study looked at culture and its influence on physical activity for Aboriginal people. The results showed that the socialization aspect of sports and recreation was very important to all participants. There were a variety of opinions regarding the desire to incorporate cultural components into physical activities. Some participants felt that programs should be designed with a holistic approach, while others felt that it was unnecessary to incorporate Aboriginal culture in contemporary sport activities. This discrepancy illustrated the different beliefs of Aboriginal people living in the same geographic location. Nonetheless, this study does provide insight to Aboriginal peoples in Saskatoon and the value they place on physical activity. However, it is important to note that this study did not ask youth their opinion of culture and physical activity; only Aboriginal leaders were interviewed. Additionally, detail was not given on who these Aboriginal leaders were, and only a small component of this study was dedicated to investigating the role of culture in physical activity for Aboriginal peoples in Saskatoon. Aside from the smaller Canadian studies

discussed, some larger national surveys are available on the physical activity habits of Aboriginal peoples.

The First Nations Regional Longitudinal Health Survey (Assembly of First Nations, 2007) surveyed over 22,000 Aboriginal people living on-reserve across Canada on various aspects of health. The youth (age 12-17) reported that they participated in traditional physical activities, outdoor activities, and team sports. Activities of greater intensity were prevalent among First Nations boys (12-17). Girls (12-17) in this study preferred individual activities of moderate intensity. This study also compared physical activity participation with the general population and found that physical activity in Aboriginal youth tends to decrease with age at the same rate as non-Aboriginal youth (RHS, 2007).

In 2001, the second Aboriginal Peoples Survey was conducted by Statistics Canada. This study involved 123 First Nations reserves, 53 Inuit communities, eight Métis settlements, 35 other communities with a high Aboriginal population, and nine urban areas. Among Aboriginal children (age 6-14) living in non-reserve areas, 71% participated in sports activities at least once per week (Statistics Canada, 2004). However, the survey did not examine what types of physical activity and sports were preferred, or the intensity in which they were played. But the survey did show that youth who participate in organized extra-curricular activities such as sport, were more likely to possess greater self-esteem, to enjoy better social interactions with their friends, and to achieve relatively higher scholastic results (Statistics Canada, 2004).

Physical activity perceptions, beliefs, and behaviors have also been examined in Australian Aboriginal youth. An urban based ethnographic study in Melbourne Australia looked at the social and cultural context of physical activity for urban Aboriginal people (Thompson et al., 2000). These researchers found that some types of physical activities assist individuals in

balancing and maintaining their important social connections, and other types of activities had a negative effect. Exercise for fitness and for personal health negatively affected the balance because the focus was on the individual, not the community. Sport and everyday activities that are socially oriented positively affected the balance (Thompson et al., 2008).

A similar study in Brisbane, Australia built on the above mentioned study and explored the meaning of, the barriers to, and potential strategies for promoting physical activity among adult (18 and older) urban Indigenous Australians (Hunt, Marshall & Jenkins, 2008). The results of this study indicated that the participants understood the relationship between physical activity and health. Frequently reported physical activities done by participants included walking, domestic chores, and specific sports. Barriers to activity included being judged by others when in public spaces, cost, and accessibility. Family engagement and group-based activities were strong motivators for participation.

Recently, Nelson (2009) conducted a qualitative study with 14 urban Aboriginal young people (11-13) in Australia to explore Aboriginal young peoples' perceptions of sport and physical activity. Overall, the findings suggested great diversity in the young peoples' engagement with sport and physical activity. All participants in this study participated in sport or other physical activities. These activities and sports were played in and out of school, and were classified as competitive or "just for fun" with friends and family. Participants engaged in both group activities and solitary physical activities. Many of the participants felt that physical activity connected them with their family, friends, and community. Dancing was seen by many young women as a connection to culture and different than other physical activities or sports. Family appeared to heavily influence participation in both organized sport and physical activity.

Some participants enjoyed organized sports because of the competition. Many young people spoke of winning as both a motivation for, and reward from, playing sport.

When examining the literature on the beliefs and behaviors of Aboriginal youth on physical activity it was clear that Aboriginal youth believe that group physical activity and sports are important and enjoyable. All reviewed literature demonstrated that Aboriginal youth were active and engaged in a variety of sports and physical activities. Two studies, Nelson (2009) and the First Nations Regional Longitudinal Health Survey (Assembly of First Nations, 2007) found that Aboriginal youth participated in traditional physical activities such as dancing, hunting and fishing. One of these studies looked at on-reserve Aboriginal youth and the other had Australian participants. There were no Canadian studies that looked at traditional physical activities in urban Aboriginal youth. The only group specific studies that involved more intensive methods focusing on urban Aboriginal youth participants of both sexes were conducted in Australia. The information gained from the Australian studies mentioned above might not be transferable to a Canadian urban center because of cultural, political, and economic differences between urban Aboriginal Australians and urban Aboriginal Canadians.

1.3.5 Aboriginal Youth Behaviors and Beliefs Pertaining to Diet

There is a need for a more comprehensive understanding of beliefs that urban Aboriginal peoples have about food (Willows, 2005). For example, what do they believe to be healthy and what do they think about traditional foods? It is also necessary to gain a more comprehensive understanding of the eating behaviors of urban Aboriginal people (Willows, 2005). Although there are studies on both the eating habits and determinants of healthy eating in Aboriginal youth, these studies predominantly involve on-reserve-youth (Wilson & Young, 2008).

The First Nations Regional Longitudinal Health Survey (2007) surveyed approximately 5,000 youth aged 12-17 living on-reserve in Canada. Questions regarding nutrition, such as frequency of traditional food consumption, were included in this survey. The questionnaire asked the participants if they ate a nutritious balanced diet and then asked about specific unhealthy foods (e.g. chips, pop, fries) and traditional foods (e.g. land game, fish, bannock). The results showed that only 20% of Aboriginal youth believed they always or almost always ate a nutritious meal, compared to 62% who said they sometimes do. This survey showed no significant differences between males and females in terms of dietary habits. However, boys consumed more fast food and soft drinks than girls and the girls consumed more sweets (cake, pie, etc) than the boys. In regards to traditional foods 14% of youth stated that traditional food was never consumed in their home, and 35% said that they had eaten traditional protein based meat such as game or fish at some point in the last year. Although this study involved thousands of Canadian Aboriginal youth, it is important to remember the participants lived on-reserve. Food procurement can be very different in an urban setting, especially for traditional foods.

A recent review of the determinants of healthy eating in on-reserve and off-reserve Aboriginal peoples in Canada was conducted by Willows (2005). In Willows' review many influences on diet in Aboriginal peoples were highlighted, including food insecurity, physical environment, individual, and societal level influences. This work determined that one of the main societal influences on diet for Aboriginal peoples was culture; cultural influences can determine what food is acceptable and preferable, when and how to eat, and the foods considered ideal or improper (Willows, 2005). Taste preference was also a determinant that affected Aboriginal diet. In some First Nations cultures having a preference for traditional foods is seen as important and sophisticated (Willows, 2005). Taste preference for traditional food was found in multiple

studies with children and youth (Willows, 2005). However, these taste preferences did not always translate in to consumption of those foods. A study with Cree children showed that they preferred traditional foods, but due to circumstances they ate store bought food most of the time (Bernard, Lavallee, Gray-Donald, & Delisle, 1995). Willows also found that there was a strong association between eating traditional food and feeling healthy. Another important determinant highlighted was food insecurity; Aboriginal peoples were over represented among those experiencing food insecurity. Thus, food cost was a determinant of healthy eating for many Aboriginal families. Interestingly, this review illustrated that some Aboriginal communities used food sharing networks as a strategy against food insecurity.

In addition to Willows' review, which identified many determinants to Aboriginal peoples diets, some smaller studies have examined the beliefs that affect dietary behaviors in specific Aboriginal communities. Gittelsohn et al. (1996) conducted an ethnographic study in an Ojibway-Cree community in Northern Ontario. This study sought to understand the beliefs, perceptions, and behaviors concerning diabetes and related cultural features. This study's findings on diet indicated that the participants dichotomized food into "Indian" and "White Mans" groupings. "Indian food" was perceived as healthy, while "White Mans" food was seen as unhealthy. Some participants felt that eating traditional Indian food such as moose, beaver, and duck could prevent disease.

A subsequent study by Gittelsohn et al. (2010) investigated dietary beliefs and behaviors using formative research with Inuit people in Nunavut. This study was designed to develop a chronic disease prevention program. Gittelsohn's study used the methods of interviews (n=45), dietary recalls (n=42), community workshops, group feedback, and implementation training. Participants were aged 19-87 years. The authors identified three key cultural themes, food

sharing, perceived healthiness of country foods (traditional foods), and importance of family.

Another notable finding was that the younger respondents consumed less country foods

(traditional foods) and had a lack of familiarity with their preparation.

Aside from the above mentioned Canadian studies, an Australian study looked at the social and cultural context of food in an urban Aboriginal population (Thompson et al., 2000). In this study an ethnographic approach showed that there were beliefs that tied people to their family and community through dietary behaviors. The authors noted that three types of food exist in the participants' culture; fast food, diet food, and family food. Fast food had little social value; it was eaten just for hunger. Diet foods were isolating and connected to the medical world. Family foods were rooted deeply in past and were symbolic to family and culture. Family foods were conceptualized as slow meals; slow meals took a long time to prepare.

There are some apparent themes in the literature on dietary habits and food related beliefs; these include the perceived healthiness of traditional food and the importance of family and community. However, the comprehensive review by Willows (2005) and the accompanying studies in this literature review reveal that there is a lack of information on the dietary beliefs and behaviors of urban Aboriginal youth.

This review has presented the available studies on the beliefs and behaviors of Aboriginal youth on body weight, physical activities, and diet. Most of the literature has typically examined only one of these three aspects, and furthermore, there have been some conflicting results in each respected area. The majority of the studies reviewed were based in rural or reserve communities, in the U.S.A. or Australia, and thus the data may not be transferable to an urban Aboriginal population in Canada. Lastly, there has been a lack of literature that uses qualitative methods to present the voices of urban Aboriginal youth. Therefore, there is a need for a richer and more

descriptive understanding of the beliefs and behaviors of urban Aboriginal youth regarding body weight, physical activity and diet. When these beliefs and behaviors are understood, health promotion programs and materials can be tailored to meet the needs of urban Aboriginal young people.

CHAPTER TWO

2.1 Methodology

2.1.1 Research with Aboriginal people

Historically there has been distrust and resistance on the part of Aboriginal groups in relation to university based researchers (Henderson, Simmons, Bourke, & Muir, 2002). This is because of a fear that they will be stereotyped due to misinterpretation and misapplied results (Marshal & Rotimi, 2001). Another reason for distrust is the "helicopter approach", where researchers fly in and get there data and then fly out, all with little interaction with those who they are researching (Macaulay et al., 2004).

Many of today's guides on research with Aboriginal peoples have come from Aboriginal worldviews and community ethics. For example, many Aboriginal groups in North America value reciprocal relationships and collective validation in research (Costellano, 2004). For that reason, research that seeks objectivity by maintaining distance between the investigator and the informants violates Aboriginal ethics (Castellano, 2004). Furthermore, information should not be gathered in brief encounters with Aboriginal participants. Attempts to gain an understanding of Aboriginal life and concerns from an objective, short-term, outsider vantage point have produced much of the research that Aboriginal peoples reject as distortions of their reality (Castellano, 2004). From these Aboriginal ethics has come the need for participatory research that is founded on reciprocity and longer term engagement.

These Aboriginal ethics have informed the development of the Canadian Institute for Health Research (CIHR) Guidelines for Health Research Involving Aboriginal Peoples (2008), which the University of Saskatchewan recommends. The CIHR guidelines stress the importance of relationships, collaboration, and reciprocity. This study follows all the CIHR guidelines for conducting research with Aboriginal peoples. I have built relationships by coaching and volunteering with Oskayak students for the past two years. During this time I have gotten to know many students and educators. I have collaborated with teachers, coaches, and administrators on multiple occasions when working together on reports and grants. I have also engaged in reciprocity by teaching lessons and running after school sports programming.

The CIHR Guidelines stress the need for participatory research. Participatory research can facilitate community participation, shared power, and decision making (CIHR, 2008). CIHR notes that one challenge is that there is no standard way of obtaining community input. However, early involvement in the community (the school) lays the groundwork for the partnership between the researcher and the community (Weijer et al., 1999). In this study I had a relationship with school leaders prior to starting this study, thus, I have been able to gain feedback on my study throughout the duration of this project. This constant feedback aligns with another CIHR Guideline that insists that there is ongoing and accessible communication with the community.

Communication during any research study is important; however, what happens after data is collected is also important. The community should benefit from the project in some way, whether it is tangible or intangible. In this study, the benefit has been specific knowledge about the students whom the teachers and staff work with. By sharing my findings with the teachers and staff at Oskayak they have gained a stronger understanding of their students' knowledge, attitudes, and beliefs on healthy eating, physical activity, and healthy body weight. I provided the Principal at Oskayak with a summary report that highlights the key findings from this project. Upon looking through the report the Principal informed me that it was very timely, and she could use it in the near future.

Although rules and guidelines for best practice are crucial to ensuring that past wrongdoings are not repeated, a researcher should also examine ethics from a solely Aboriginal standpoint. In Aboriginal knowledge, ethics cannot be reduced to a set of guidelines. Ethics are closely related to who you are, the deep values you subscribe to, and your understanding of your role in the spiritual order of reality (Castellano, 2004). Throughout the processes of this project I have used this description of ethics to guide my work. I have been cognizant of who I am and what experiences led me to do this research. Reflecting on the virtues that guide the choices I made everyday such as compassion, idealism, and integrity have also assisted me in research that is ethical from an Aboriginal worldview.

In recent years there has also been a call for health research centered on the voices of Aboriginal youth to gain their perspective on their own health. Aboriginal youth want their knowledge and visions to be recognized; they desire to be more involved in solving the issues they face and highlighting their strengths (RCAP, 1996). By engaging Aboriginal youth in health research we can apply their knowledge and enthusiasm for making positive change within their culture to find strategies to address some of the health issues they face. This study has shared the voices of urban Aboriginal youth to highlight the important perspectives they have.

Another important shift in Aboriginal Health Research is the need for research that does not focus solely on ill health. Previous studies have tended to view urban Aboriginal Canadians through a "problem lens" and often have not highlighted the positive health behaviours and beliefs that exist (Urban Aboriginal Peoples Study, 2010). This study sought to examine all beliefs and behaviours among urban Aboriginal youth. This effort has assisted in the understanding of what makes this group healthy, not just ill.

2.1.2 Qualitative Methodology

Qualitative methods offer an opportunity to gain a deep understanding of why people behave a certain way and what factors influence their behaviors (Creswell, 2003). The qualitative approach to research is utilized with the intent to gather and collect rich, meaningful, and textured data (Creswell, 2003). Qualitative research asks questions that are broad and allow the participants to explain their ideas (Creswell, 2003). Allowing participants to explain their thoughts and ideas is important in Aboriginal research because it shows respect for the knowledge that Aboriginal people have about their own lives.

Quantitative research has measured health status by quantifiable indicators such as mortality rate, causes of death, and incidence and prevalence of certain conditions. However, this quantitative data does little to increase our understanding of underlying factors such as the cultural influence on health (Meadows, Lagendyk, Thurston, & Eisener, 2003). At present there is a lack of research using qualitative methods to understand factors that influence body weight in Aboriginal peoples (Willows, 2005). Furthermore, qualitative research stresses the intimate relationship between the researcher and what is being studied (Denzin, & Lincoln, 2005). Relationships are vital in Aboriginal health research because they foster communication and empowerment (CIHR, 2008).

2.1.3 Ethnography

This study employed the qualitative method of focused ethnography (Gittelsohn et al., 1996; Thompson et al., 1996). Ethnography provides a means for exploring a unique cultural group because of the relationships formed between the researcher and members of the community (Morse & Richards, 2002). An ethnographic study describes how a cultural system influences human behavior (Bernard, 1994). In ethnography, researchers can draw upon their

own skills and strengths to increase the efficacy of themselves as the primary research tool (Denzin & Lincoln, 2005). Ethnography can also lead to the development of a theory (Mueke, 1994). A theory can provide a basis for hypothesis, hunches, or interpretations, even in other settings (Lecompte & Schensul, 1999). Studies that only describe behaviours literally and report what was explicit are not ethnographic but simply case descriptions (Mueke, 1994). In health sciences, ethnography is a means of gaining access to health beliefs and practices of a culture (Morse & Field, 1995). In the last 15 years there has been a growth in ethnographic studies involving Canadian Aboriginal peoples; specifically, research on Aboriginal cultural understanding of diabetes (Waldram et al., 2006).

Focused ethnography is based on the same principles as traditional ethnography (Mueke, 1994). The strategy of focused ethnography has been predominantly used in the investigation of contemporary cultures that are highly differentiated from other cultures (Knoblauch, 2005). Both types of ethnography use interviews and participant observation. Similarities between focused and traditional ethnography are that data is collected in the community, interviews are the primary source of data gathering, and there is an emphasis on describing the perspective of the participant (Creswell, 2003).

In traditional ethnography, prolonged time is spent in the day-to-day lives of the cultural group observing behaviors, customs, and ways of life (Creswell, 2003). Focused ethnography is content specific and issue focused, which helps reduce the large amount of time it takes to collect data (Mueck, 1994). Focused ethnography is characterized by shorter field visits compared to the extended time in the field that is necessary in traditional ethnography. The shorter duration of field visits in focused ethnography is enhanced by the use of audiovisual technologies such as voice recorders (Knoblauch, 2005). A key precursor to successful focused ethnography is prior

familiarity with the setting (Knoblauch, 2005). Because I have developed relationships at Oskayak prior to starting this project I was familiar with the research setting. The time I spent at Oskayak during my study allowed me to build and nurture strong relationships with participants in my study. Such relationships are essential in focused ethnography; if participants trust you they will answer questions truthfully, with insight and rich descriptions.

2.2 Procedures

A timeline of the procedures for this study in included in the appendices (Appendix A). Ethical approval from the University of Saskatchewan and permission to conduct research from the Superintendent of the Saskatoon Catholic School Division was obtained prior to the initiation of the study (Appendix B). My first contact was a known sponsor whom I knew prior to starting the current study. According to Patton (2002) a known sponsor is a person who has a legitimate relationship with the particular group of interest. My known sponsor invited me into their class to volunteer and get to know students. Before I began participant recruitment I wanted to find another teacher who would allow me to volunteer in their classroom to build relationships with other potential participants. I wanted to get to know potential participants who were not in my known sponsor's classes for two reasons: I wanted to work with younger students (at that time my known sponsor only had grade 10-12) and I also wanted to get to know students outside of physical education class. My known sponsor suggested another teacher that they thought might be interested in working with me on this project. At that time this other teacher was teaching grade nine math, social studies, and language arts. I was fortunate that the other teacher was enthusiastic about working with me on the project and quickly I had two known sponsors working with me.

For the next month I volunteered in both my known sponsors' classes assisting students in math, language arts, social studies, and physical education. Within a month I felt that the students were comfortable with me and I began participant recruitment in grade nine math, language arts, and social studies, in addition to grade 10, 11, and 12 physical education. I introduced my research to the students and then handed out a form that asked if the student was interested or not interested in participating (Appendix C). If the student indicated they were interested in participating they were asked to give me their name, contact information, and their choice of participating in a focus group interview or one-on-one interview. Once I determined who was interested in participating I asked those students to complete assent forms and have all consent forms signed by their parents or guardians (Appendix D). I distributed the forms, and if I was not at the school when a student brought it back the school office staff collected them for me.

I was fortunate that 9 students were interested in participating in my study right after my initial introduction. The other participants were recruited through snowball sampling. This approach is used for locating participants who might be information rich (Patton, 2002). The first participants or a key informant introduces the researcher to other informed individuals (Patton, 2002). In my study I used my sponsor teachers and my first interview participants to connect me with other potential participants. This method was successful; 6 final participants were recruited by snowball sampling. Participant interviewing and recruitment stopped when the point of redundancy was reached. Redundancy is when enough data is collected that patterns and relationships are emerging and new themes are not surfacing (Patton, 2002).

Students who volunteered for the interviews were informed that they could withdraw at any time without prejudice or penalty. Anonymity and the protection of the participants'

identities were assured. Confidentiality of all data provided was also assured. No names or other means of identification have been used in this thesis. Students were also informed that there would be no academic penalty or benefit for participation.

Each interview lasted approximately 45 minutes. After the interview each participant received a ten dollar gift card for Subway or Booster Juice. Giving gift cards was suggested to me by the school Principal. She informed me that when you seek knowledge from an Aboriginal person, it is customary to give a gift in return. After the interview was transcribed and analyzed I met a second time with the participants to go over the data and possible themes.

2.3 Participants

Participants who volunteered for this study were in grades 9 through 12. Oskayak was selected as the site for this study because I wanted to work with urban Aboriginal youth, due to the lack of research with this sub-population. Oskayak is the only Aboriginal High School in the city, and thus it provided me with an opportunity to work with a number of urban Aboriginal youth.

The participants who did not initially volunteer for the study were recruited and selected based on snowball sampling and key informant recommendations, as described in the previous section. When asking the sponsor teachers and other participants for recommendations of future participants I inquired about students with varying physical activity levels, different socioeconomic backgrounds, and both sexes. I attempted to interview equal numbers of males and females; however, I did not achieve this. The unequal ratio of males to females is discussed in the limitations section.

Fifteen participants took part in the interviews for this study. Eleven of the participants were females and four were male. They were between the ages of 14 and 21, with a mean age of

16.73. Based on observational data, 10 of the participants had healthy body weights, and five may have been overweight.

Most participants (13) lived on the West-Side of Saskatoon. Five participants lived on their own without a parent or guardian. Of those five, one participant was a young mother who lived with her husband and two-year-old twins. Another participant had the option to live at home with her mother, but since she was going away to University the next year her mother felt it was good for her to live on her own to "try it out" before leaving. Two of the participants who lived on their own worked part time at a convenience store and a fast food restaurant to help support themselves. Participants who did not live on their own resided with mothers, fathers, aunts, and older siblings. In most cases there was one parent or guardian caring for the participant. Only one participant lived with both their mother and father, while another lived in a blended family with his father and step-mother. Over half of the participants discussed living on-reserve at some time in their life. Almost all of the participants had spent time on their family's reserve for visits, including longer stays over summer holidays or Christmas break.

All participants, aside from one, had been at the school for less than a year, and over half had attended Oskayak for less than six months. At Oskayak there was a strong emphasis on attendance, as it was the largest problem teachers encountered. Thus, a "good student" may not be the student getting high grades, but it may be the student with high attendance. Eleven of the 15 participants in this study attended school every day. All 11 of these participants took pride in their attendance. In regards to academic performance over half of the students interviewed were able to do their school work with relative ease and achieved good marks. Two of the grade nine participants were exceptional students who always handed in high quality work and finished inclass-assignments quickly.

There were five participants who participated in competitive team or individual sports at the school or in the community. All participants with the exception of one engaged in some type of group physical activity at the school.

2.4 Data Collection

2.4.1 Interviews

Students who volunteered to participate in the study were given a choice to participate in focus group discussions or one-on-one interviews. This option was offered because some students may have been more comfortable and confident sharing in a group setting, while others may have preferred one-on-one interviews.

Focus group interviews are an excellent technique to gather information from several people in one session (Thomas, Nelson, & Silverman, 2005). Focus groups are advantageous when interaction among interviewees will likely yield the best information (Creswell, 2003). Patton (2002) suggested that focus group interviews can provide quality control because participants tend to provide checks and balances on one another that can serve to curb false or extreme views. Although there are benefits to focus groups with young people, there is one key downfall to them. Some young people feel focus groups do not facilitate a sense of comfort when sharing information. The main strength of one-on-one interviews is that they offer confidentiality that may result in the participant giving more truthful answers, which are not influenced by any other person. Given that body weight can be a sensitive topic for many adolescents it is important to ensure that participants have an option to have their thoughts be confidential from other students. Thus, one-on-one interviews were offered as an option to participants.

Both the focus groups and one-on-one interviews used a semi-structured interview guide (Appendix E). According to Morse and Field (1995) the semi-structured interview is used when the researcher knows most of the questions to ask but cannot predict the answers. This format was used for this study because it allowed me to get all of the information I required while still giving the participants freedom to express their thoughts fully. Semi-structured interviews bring out discussions and conversations and allow the interviewer to explore topics if they feel it is important (Patton, 2002). A semi-structured interview guide also makes interviewing many different people more systematic and comprehensive, as there is an attempt to cover all important topics with all participants (Patton, 2002). The interview questions in the focus groups were the same as in the one-on-one interviews for consistency. Many of the questions in the interview guide had been piloted with Aboriginal youth who played on a basketball team I coach. All interviews were recorded on audio tape to ensure that all data is collected and recorded accurately. The tapes will be stored for five years in the College of Kinesiology at University of Saskatchewan in care of Dr. Louise Humbert.

All participants were interviewed in this study. Twelve participants participated in oneon-one interviews. Four participants wanted to be interviewed with others, and these individuals
only desired to be interviewed with one other person. Initially, I thought that there would be an
equal distribution of participants who desired focus groups and one-on-one interviews however, I
was incorrect. As stated above, the topics discussed could have been seen as too sensitive to be
discussed in front of peers, and the participants may have felt safer in discussions with one
person who they knew could ensure confidentially and anonymity.

It should also be noted that informal conversations also took place in a few instances. In informal conversations there is little interruption or structure from the researcher (Patton, 2002).

In 2006, Fleming worked with young Aboriginal participants in a school based research project and found that informal conversations provided quality information and helped build trust. The conversations that I had took place during more natural social interactions, such as in the lunch room, office, or after class. These conversations were often with five key people: two teachers, two administrators and a staff member. These individuals helped me understand what I was observing and hearing from participants. After these conversations I recorded the details in my field notes. All field notes were recorded in my research journal.

2.4.2 Participant Observation

Participant observation is essential for data gathering in ethnography. Observations often include the different reactions of individuals in the social setting being studied (Morse & Field, 1995). An advantage of observation is that the researcher can see things that may be routine for the individual or cultural group and therefore might not be reported in an interview. Furthermore, direct observation gives a chance to learn things people may be unwilling to discuss in an interview (Patton, 2002).

In this study I used the participant as observer observation method. In this method the participants are aware of the researcher's dual roles. The researcher negotiates work responsibilities and delineates times for writing field notes, observing, conducting interviews, and working (Morse & Field, 1995). This seemed like a natural fit as I had already been volunteering at Oskayak for the last year in the classroom and with extracurricular activities.

My observations took place during lunch, after school, in class, and in the hallways. The following list is what observations and inquiry topics were given attention when I observed the students (Patton, 2002, P. 302):

- Description of the physical environment or setting
- Description of the social environment

- Description of the structured or planned interactions
- Observing informal interactions and unplanned activities
- Observing non verbal communication
- Commenting on what does not happen (nonoccurrence)
- Observing my own reactions and emotions in situations

In addition to the list above, health behaviors were also observed. Health behaviors included food choice and physical activity choice and level. Observations and descriptions were recorded in field notes. Field notes also contained my insights, interpretations, and the beginnings of analysis (Patton, 2002).

Many of my best observations and field notes came from my attendance and participation at cultural events. Powwows, feasts, and smudges are cultural events that I was unfamiliar with. Often when observing it was easiest to pick up on behaviors that I normally did not see; thus, I found that data from these events was very rich in description. I also found it easier to reflect upon my own reactions and emotions at cultural events, again I believe this was due to the novelty of the situations I was in.

In addition, I found that lunch time was a good time to observe health behaviors. Examining and recording what was served at lunch, who was eating what, and how much they were eating was very helpful in data analysis. Furthermore, I observed what they did after they were finished eating, such as going to the gym, going for a walk, and going outside for a cigarette.

2.5 Data Analysis

I have analyzed my data according to the recommended analysis procedures for ethnography (Morse & Field, 1994). As recommended, data analysis started at the initiation of this study. From the moment I stepped into the school I began to formulate thoughts and ideas

and record them in my field journal. I was also recording observations from the first day onward. I transcribed all of the audio tapes soon after the interviews so that data analysis could be done continually throughout the project. As the study moved forward more interviews were transcribed and observations recorded. I began to read and re-read the interviews and the observational field notes. While going through the data I began to categorize pieces of the interviews and field notes by coding for key words, phrases, and topics. Phrases such as "I feel", "I think", "I believe"; along with action words such as "I do" "I eat" "I play" were identified. During the categorization stage the categories remain broad (Morse & Field, 1994). When categorizing and coding the data I used Microsoft Word to organize the categories. As I went though each interview and found key pieces that fit a category I copied and pasted those pieces into another Microsoft Word document that housed all the categories.

After developing 16 categories and becoming familiar with the data I began thematic analysis. Thematic analysis involves the search for common threads and relationships that extend throughout multiple categories (Hunter et al., 2006). Often themes are more abstract in nature and can be conceptualized as ideas. During thematic analysis I was reading literature related to the categories and themes that were emerging. Being in the literature assisted in determining themes because I was able to read about specific behaviors or beliefs that I was seeing and how they related to culture in other studies. As I went through the literature and categories I found nine ideas that I determined to be themes. Upon having these nine themes checked by another researcher, who was proficient in qualitative data analysis, it was determined that some of the themes were still categories and some themes could be combined, as the overarching idea behind the two themes was actually the same. Thus, results were re-analyzed and clustered into four themes.

The quality of the data analysis has been assessed by trustworthiness, transferability, and confirmability. Trustworthiness is a quality achieved in a study when the data collected is generally applicable and consistent (Thomas, Nelson, & Silverman, 2005). Data is applicable when the readers can become familiar with the study and assess whether the setting and results will transfer to their particular setting or future research study (Thomas et al., 2005). The applicability of this study relies on the thick description of the observations, settings, and participants I have provided (Morse & Field, 1995). In this study I ensured consistency by continuing to collect data until the point of saturation.

Transferability is defined as the potential for the results of one setting to be transferred to other settings (Thomas et al., 2005). This is very important when deciding if the results may be useful in another research setting (Thomas et al., 2005). Since generalizability is not a goal of qualitative inquiry, and most qualitative research studies do not benefit from large randomly selected populations, transferability is an important quality to establish in qualitative studies (Thomas et al., 2005). Thick description plays a role in transferability. Without a rich description of the settings, participants, and observations a reader will not be able to determine whether what is going on in my research setting is the same thing that is happening in the setting they are looking to apply the research to. Field notes have been a tool used to help me recall different aspects of the study that were not in the transcripts. The field notes on the setting, participants, and observations have been used to give a rich description.

Confirmability deals with the issue of research bias and addresses whether another individual can place faith in the results (Thomas et al., 2005). In my study confimability has been done through member checking and triangulation. All participants were asked to review interview transcripts and add anything that might have been left out. Categories and potential

themes were shared with the participants in a "talking circle" to ensure that I had interpreted the data correctly. Talking circles are a method of discussion that can be comforting to Aboriginal research participants because the circle has a long tradition in Aboriginal culture (Struthers, Hodge, Geishirt-Cantrell & De Cora, 2003). The talking circle was a customary cultural technique used by the Northern Plains Aboriginal peoples that was used to carry out group processes (Struthers et al., 2003). I did not disclose any individual's identity or interview data during the talking circle; I believe that this made the participants feel more comfortable reviewing the themes and conclusions and contributing to the discussion. During the talking circle I explained how specific categories were grouped together to develop the themes. After I discussed each theme the floor was open for participants to share their thoughts on that theme. The only rule was that there was no interrupting of another person when they were talking. Participants verified all the themes I had found at the talking circle and expanded my understanding of the behaviors of other urban Aboriginal youth that did not attend Oskayak. After I explained the themes many participants discussed how the themes might also be applicable to their siblings or friends outside of school.

Triangulation is the use of two or more methods used to build a coherent justification for themes. The observational field notes and the informal interviews have been used to triangulate the data by providing a source of data to validate and crosscheck the findings of the interviews (Patton 2002). In this study the three data sources provided similar results; thus, there is an increased chance that my results are trustworthy.

CHAPTER THREE

3.1 Results

The purpose of this study was to provide insight into the influence culture has on urban Aboriginal youth regarding body weight, diet, and physical activity. Culture is seen as the beliefs, behaviors, norms, attitudes, social arrangements, that form patterns in the lives of members ((LeCompte & Shensul, 1999, pg. 21). For the purpose of this study culture was viewed as beliefs and behaviors, which persist over time. Beliefs were represented as what the participants felt; whereas actions represented their behaviours. Direct quotations were used to illustrate the participants' beliefs and behaviours (Hunter et al., 2006). When quoting the participants I chose to keep all of the participants wording, in an effort to accurately reflect their views. Thus, there may be expressions or terms that are not deemed appropriate by the reader, but perfectly acceptable by the participant.

Observations from my field notes have been used to complement the participants' quotations. It is important to note that the results and interpretations in this study were informed by my background. When interpreting an ethnographic product the reader needs to keep in mind the background of the researcher (Denzin & Lincoln, 2005). As stated in the introduction, I have worked for three years previous to this study with Aboriginal youth and those experiences have shaped the way I interpret data.

In this study four themes describe the influence of culture on body weight, diet, and physical activity. These themes were: (i) acceptance of our bodies, (ii) playing together, past and present, (iii) traditions and sharing and (iv) the struggle.

3.1.1 Acceptance of Our Bodies

"Healthy bodies are all different shapes and sizes, some can be really tall but big, and still be healthy. You don't have to be really skinny to be healthy. You could still be working out and eating healthy, because everyone's bodies are different!" (P-9)

Participants in this study believed that a healthy body comes in all sizes; thus, there was a general acceptance of diversity in body weights and sizes. When I asked a young woman to describe a healthy body weight or size she replied, "It depends on your own weight and how you want to be. If you want to be tubby, be tubby all you want, it's ok because it doesn't matter what people think. It's your body not theirs" (P-3). Another participant had a similar response, stating, "Some girls think wrong, like I'm too fat, but that's the way God made them" (P-4). Most male and female participants felt that healthy body weight and size depends on the individual person.

While there was an acceptance of different body weights among participants, two young women told me that many other Aboriginal youth "...think wrong" (P-4). They explained that many Aboriginal youth want to be thinner; however, the youth who think they need to be thinner are incorrect and that they should be happy with their weight. This may indicate that other Aboriginal youth do not feel that their body weight is healthy. Furthermore, this inconsistency may indicate that the participants in this study are unique in their beliefs about healthy body weight.

Some participants felt that Aboriginal peoples may be more accepting of different body weights compared to other people "...my culture doesn't care what size you are, as long as you are a strong person and don't care what people think" (P-4). A young man explained,

^{*}P denotes participant number

^{*} FJ denotes field journal

"Aboriginal people are friendly. You don't really want to say that a person's weight is not a good body weight" (P-10). He further explained that Aboriginal people do not want to put themselves or others down in regards to their body weight.

Although all participants felt there were many healthy body weights, many also felt the most desirable type of body was a "...toned and muscular body" (P-5). One young man said that, "It is good when you can see that people keep themselves fit" (P-10) and another female that, "Muscle shows a healthy body weight" (P-8). This finding may denote that fitness is an important contributing factor to perceived healthy body weight for these young people. Some participants expressed internal conflict with this belief. When a small number of participants were asked about the ideal body, they gave examples of other students at Oskayak. They then expressed that they desired to have this muscular body type, like the person they described, but could not despite their efforts to do so. This finding may indicate that some participants accepted a wide range of body sizes and weights as healthy, but still strived to achieve what they felt was an ideal body weight.

While all participants reported accepting a wide range of body weights as healthy and all felt that the athletic body was the ideal; they were also aware that unhealthy body weights did exist. It was evident that participants felt that unhealthy body weights were weights that were far outside the wide range of healthy body weights. For example, "...well there are some weights that are not good like if they are too scrawny or obese" (P-10). When probing participants to explain unhealthy body weight I noticed that many were hesitant to describe an unhealthy body weight to me. This behaviour may be related to the remarks explained earlier about Aboriginal peoples not wanting to tell others what a healthy or unhealthy body weight is.

Participants felt that the perceptions and opinions of others affected how they perceived their own body weights. A young woman explained that unhealthy body weights may be related to the perceptions of white people. "It's the way white people act around them (other Aboriginal girls). Some girls call them fat, so they want to get skinnier; some call them skinny so they want to get fatter" (P-1). Although the participants acknowledged that the negative views of others exist and can sometimes have a harmful effect on how they perceived their body weights most stayed rooted in their acceptance of different healthy body weights for different people. This was expressed in a young man's comment, "People are more accepted who are skinny. Obese people are looked down upon. People are stupid" (P-7). The young man made clear that he was saying people are stupid for judging others.

Participants believed that another cause of unhealthy body weights was drug and alcohol use. The young men and women explained that drugs and alcohol prevent you from looking after yourself. Participants described that when you are "high" or "drunk" you eat food that is not good for you, you are not active, and you just lay around. This finding highlights that drug and alcohol use were issues that many of the participants were familiar with; furthermore, it illustrates how participants in this study connect unhealthy body weights with poor dietary habits and lack of physical activity.

Participants who felt they had healthy body weights were the same participants who said they were active and ate healthy. Often participants judged whether they had a healthy body weight solely on their dietary habits and physical activity patterns, "I have a healthy body weight because I eat properly and workout" (P-1). Another girl explained, "I don't have a healthy body weight. I try my best to eat good stuff and I try to exercise but I'm too lazy" (P-5).

The participants in this study believed that there were many different healthy body weights. Interestingly many participants, both male and female, believed that a muscular body was most desirable for themselves and their peers. Those who felt they had a healthy body weight believed it was because they were active and ate healthy. It was apparent they were basing their decision on whether they had a healthy body weight on their behaviours, not on their actual weight or size. These findings may suggest that Aboriginal youth who are active and eat healthy may have higher body image satisfaction.

3.1.2 Playing Together, Past and Present

"Culture is powwows and hoop dances, and how we grew up" (P-13).

"At family get-togethers we are active together, like playing soccer and hockey" (P-8).

Participants in this study engaged in a wide variety of physical activities and sports in group settings. For the young men and women in this study, there were many cultural influences on sports and physical activities. The key cultural influences were family, traditional physical activity, and school. All of these influences provided participants with many opportunities to be active in groups.

The young men and women liked to exercise and play sports with friends, teachers, immediate family, and extended family members. One student explained, "It's hard to be active when people don't want to play with you and you have to do it by yourself" (P-2). Participants felt that group physical activity helped "motivate" them. They also believed that the people they were active with provided "encouragement". Many young men and women said they enjoyed physical activity with others in a competitive setting. Participants enjoyed team sport events such as recreational sports tournaments. Moreover when asked what would get more urban Aboriginal youth active, competitive events were often mentioned, "Have tournaments. I'm pretty sure

people will go to them because I like to go to do that stuff with my friends (P-6)" said a young woman.

The specific group sports the participants took part in were: basketball, volleyball, hockey, baseball, softball, soccer, badminton, running, martial arts, and dancing. Students engaged in these sports on school teams, in recreational leagues, and on their own with friends and family. Most cited walking as an activity they did regularly. Walking was done for exercise, social purposes, and as a method of transportation. Weightlifting was also done for exercise. I observed many boys and girls at Oskayak workout in the school weight room at lunch, afterschool, and during spare classes. It was apparent that many were very familiar with different machines and different types of exercises. Most of the students learned about the different exercises during physical education. I joined in the grade 11/12 physical education class regularly and we did circuits in the weight room on multiple occasions. Although weightlifting and walking can be solitary activities the participants in this study did both of these activities with friends.

Family greatly influenced the participants' engagement in traditional physical activities and sports. Participants indicated that when their families were physically active, they were also active. "My sisters like to work out a lot, and that's why I work out. My dad was a runner when he was younger, so maybe that's why we are all athletic" (P-13). Conversely, participants also explained that it was hard to be active when their family was not active. When I asked a young woman what makes it hard to be active she replied, "Sometimes they (family) don't want to work out. I ask them and they say they don't feel like it" (P-6). Many participants described how there was an emphasis on sports and competition within their families, "We like to play basketball and always have competitions against one another. In the summer we go to the hill in

Riversdale and see who can run down the fastest" (P-1) along with, "At family get-togethers we are active together, like playing soccer and hockey" (P-8). These findings may suggest that urban Aboriginal families believe physical activity, specifically group sport, is important and this belief is being passed down to urban Aboriginal youth. Additionally, these findings confirm that family is an essential ingredient in urban Aboriginal people's culture and it influences much of what they do (UAPS, 2010).

Families also influenced the participants' engagement in traditional physical activities. The participants' parents and guardians valued traditional physical activities and it was clear that these values greatly influenced the participants. Every young man and woman interviewed stated that traditional physical activities were very important. One female explained that "My Mom makes outfits, and we go powwow trailing every summer" (P-4). Another participant further illustrated this point by stating, "Grandma takes us to sweats and ceremonies, powwows and round dances" (P-12). One young man explained that, "Dad teaches me the way of hunting and fishing" (P-10). These findings demonstrate that urban Aboriginal peoples value traditional physical activities. These findings also highlight that parents and grandparents play a significant role in the understanding of culture for urban Aboriginal youth, and make it possible for them to travel to and participate in these events.

Some of the boys hunted and fished; both of which can be physically demanding activities. In the interviews the girls talked about traditional dancing. Only a few of the participants interviewed danced competitively or regularly but many thought that they would like to learn to "fancy dance" and "jingle dance" and compete at powwows. In informal conversations with teachers I learned that many of the young Aboriginal men and women who attended Oskayak (not interviewed) took part in round dances and powwows. I was fortunate to

be invited to many events such as feasts, powwows, smudges, and round dances. Attending these events greatly increased my understanding of the role culture played in the physical activity behaviours of the participants. At the fall powwow I observed the physical activity levels of many young people. I was surprised to see youth participating in such high intensity activity. I had never attended a powwow, and did not realize the amount of energy the dancing took. The girls danced in different styles such as "jingle" and "fancy", both of which were of a high intensity; the mens' dancing was also high intensity. The young men drummed for hours at a time at a high pace in addition to singing for many of the songs. Everywhere I looked I saw people being active; children were outside running around, or imitating the older dancers. They even had dances for people who were not in the program during the breaks. One dance, called the potato dance had two people place a potato between their foreheads and dance to the music for as long as they could without dropping it. I learned that this dance was designed many years ago to teach young people how important team work is in relationships. At the powwow I saw a fusion of physical activity, spirituality, learning, and beauty.

During the interviews many participants spoke of the sense of belonging that they felt from taking part in traditional physical activities. One participant expressed that traditional physical activities were a "...way to express your peoples' teaching" (P-8) and that culture is "...what your background is and where you come from" (P-3). Participants would often say how traditional physical activities were a big part of how they were raised, and thus a part of who they were and how they identified themselves. "Culture is powwows and hoop dances, and how we grew up" (P-13). The young men and women also said they learned a lot at these events. One young man said, "Cultural events are very important. I learn a lot about myself doing these things. I talk to elders at powwows and I pray a lot" (P-10). From watching the young men and

women, they appeared to enjoy themselves when they were watching or engaging in traditional physical activities, this was confirmed by a young woman who explained, "...they (traditional physical activities) are important, and they help you. Like when I go to a powwow I sit and watch and it makes me feel happy" (P-6). These findings illustrate that traditional physical activities can be more beneficial to participants than contemporary activities or sports. Not only are Aboriginal young people physically active, they are learning about their heritage, practicing creativity, confirming their identity and experiencing spiritual growth.

The school was also a cultural influence on the physical activity behaviours of the participants. When students told of people, groups, or places in their lives that help them stay active the school was often mentioned. Although Oskayak had volleyball teams, soccer teams, running club and a hockey academy these formal teams were not brought up often in the interviews. Instead, participants frequently discussed the informal activities they engaged in at Oskayak. "During lunch (at Oskayak) you can go into the gym and work out, or afterschool the gym is open. So you have a choice to workout" (P-9). Some students who had attended other schools explained that at these schools they were not given the opportunity to play in the gym at lunch or afterschool. Another participant explained that they gym was well used by students. "Every break you can go to the gym and like play with everyone else in whatever they are playing" (P-4). A number of participants said that when they see everyone else active "it makes them want to be active as well".

Sometimes I would go sit in the gym at lunch and watch the students. I was stunned to see so many different activities going on at the same time with so many students participating.

Often I would see ball hockey, volleyball, basketball, and soccer all going on at once in one gym.

I recall thinking it was "chaos", but then re-assessing my analysis of the situation and changing

my opinion to "who cares if its chaos, they're all active and having fun" (FJ, Jan 24, 2010). I was also surprised to see students playing with other students they did not know, and welcoming them into the games. Right after winter intake, when new students can enrol, I saw many new students immediately invited into the games by other students in the gym. It was not long before I was not able to sit and observe; soon enough I had students calling me into volleyball and basketball games. In an informal conversation with a teacher we discussed this phenomenon. This teacher informed me that she had never seen students be so welcoming to new students at other schools.

The offering of team sports or fitness programs could also be seen as a cultural influence. These teams and programs are group activities and foster a sense of belonging and community, which are important cultural values for urban Aboriginal peoples (UAPS, 2010). Although the participants did not bring up Oskayak team sports often in the interviews, what they did repeatedly recognize was the general coming together of students to be active. This could be a reflection of how many of the students were raised; as most grew up in families, neighbourhoods, and communities that were inclusive in nature and every effort was made to include everyone in sports and activity. Oskayak provided a place for students to integrate the physical activity behaviours they had learned at home in a school setting by allowing students to play together in a non-organized physical activity setting (e.g open gym). Thus, the school appeared to be a place that promoted inclusive group activity and this resonated with the cultural values of the participants.

In addition to promotion of inclusive group activity, Oskayak offered many opportunities for students to engage in traditional physical activities. However, it is important to note that most participants were engaging in these activities prior to coming to Oskayak. All participants had

been at Oskayak for less than a year and many had been involved in traditional physical activities since they were young. I further investigated this phenomenon by asking participants if friends who do not go to Oskayak do traditional physical activities. Almost all the participants said that their friends were just as involved as they were in traditional physical activities. I had to laugh at myself when I asked one participant if her friends, who did not attend Oskayak, did traditional activities and she replied, "Duh, what sort of Indians would they be if they didn't do that stuff" (P-4). Another participant reiterated this concept by saying, "...it is more or less the color of your skin. If you're Native you go (traditional activities) and if your white you don't really know anything about it" (P-15), implying that going to Oskayak was not the reason he was involved in traditional physical activities. It was apparent that while Oskayak gave opportunities for students to be involved in traditional physical activities, it was not only place that the participants engaged in them. This finding may indicate that some urban Aboriginal youth are experiencing increased physical activity and other health benefits due to engaging in traditional physical activities, regardless of if they go to Oskayak. The findings also highlight that a school can offer opportunities for increased involvement in traditional physical activities.

3.1.3 Traditions and Sharing

Aboriginal people have always eaten (traditional foods) and they used to all be healthy" (P-14).

There were several cultural influences on the diets of the young men and women in this study. The influences included: traditional food, family, school, and food sharing. All of these influences were rooted in Aboriginal peoples' customs and the overarching concept of community sharing.

Many participants ate traditional foods regularly in their homes, at cultural events, and at feasts. The traditional included: moose, deer, elk, fish, potatoes, and soup. Some participants

thought that traditional foods were nutritious "...because Aboriginal people have always eaten them and they used to all be healthy" (P-14). However, a few participants said that traditional foods were healthy because they were on the Canada Food Guide for Healthy Eating. The items participants listed as traditional foods were on both the Canada Food Guide for Healthy Eating and the Guide that has been adapted for First Nations, Métis, and Inuit peoples. It was interesting that although most participants felt traditional foods were healthy, there were differences in why they felt this way. Some responses were associated with a past way of life and a purely Aboriginal perspective ("We have always eaten traditional foods"), while others responses were elicited from the participants' contemporary education ("they are on the Food Guide").

In addition to believing that traditional foods were healthy, many participants enjoyed eating traditional foods. The participants who took joy in eating traditional food associated their enjoyment with family and culture. For example many students reported that they enjoyed traditional foods because "...that's what we eat at celebrations and feasts" (P-1). Many individuals who enjoyed traditional foods desired to eat more of them. One participant explained, "If I could, I would eat it every day, like wild meat and stuff. That's why our people lived so long. There was never really anyone overweight. The meat we eat today is full of bad things" (P-9). Another added, "I'm missing traditional foods, I miss moose meat" (P-10); he explained that he now lived in the city most of the time and did not get to eat traditional foods as much as he did when he lived on his reserve. Many of the participants informed me they obtained traditional foods when they lived on or visited their reserves. When I asked a young man if he ate traditional foods he responded, "Not very much anymore, cause I don't live on the rez (reservation) and that's where Mushum usually cooks, and I cook there too" (P-11).

Many participants noted the influence of their families on their beliefs about traditional foods and their eating habits. The participants whose families regularly cooked traditional foods enjoyed traditional foods, ate traditional foods more often, and assisted in its preparation. For example one participant said, "Mom and Grandma teach me how to make real delicious Indian food. Like different kinds of meats, bannock, and catputchen (a type of cake)" (P-3). When the participants were on their reserves with family, they ate traditional food far more often than when residing in the city. One young woman explained, "On my mom's reserve that's all we eat (traditional food). My Mushum kills stuff. I'm out there lots in the summer" (P-9). Extended family still living on the reserve often sent traditional food such as game into the city for the participants and their families; this is described in depth below when I discuss food sharing.

In addition to influencing the consumption of traditional foods, participants also felt that their families played a large role in their consumption of non-traditional foods. For example one participant explained that his parents encouraged him and his sister to eat healthy. Others stated that often their parents bought unhealthy foods, which affected their ability to eat nutritious foods. "Well my stepmom loves junk food, so she will always have the cupboards filled with chips, and it's right there and it's so tempting" (P-10).

The school was also reported as a cultural influence on the participants' diets. As mentioned earlier Oskayak hosted many traditional activities including feasts where traditional food was served. I attended the Christmas Feast at Oskayak and observed many important cultural traditions; I wrote in my journal of the experience:

The women of the school cooked all morning. The young men did the serving, and as they served one of the elders preached about giving thanks for the women in everyone's lives. It was obvious they had a deep respect for women and were passing this

down to the young men. No one is allowed to eat until prayer is finished. I sat with a young mom of twin two-year-old boys; she explained to me how it was important for them to learn to wait until prayer was done. She diligently held the young boys back from the food in front of them" (FJ, Dec 17 2009).

It was clear that the feast was about more than just eating traditional foods; it was about spirituality, community gathering, and teaching young people (teens and toddlers) about beliefs and behaviours that are desired in their culture.

Another way the school influenced the diets of the students in a cultural manner was the sharing of food to take home. I often observed the school cook offering leftover food from daily meals and from larger events to students to take home. It was evident that the cook made the effort to offer certain foods to certain students. For example, she offered milk to the young mothers to take home on the weekends, and larger quantities of food, such as bulk buns, to the students who had other siblings at home. Perhaps this offering of food is a reflection of the cultural belief that sharing food is an important way to ensure community health and well being.

The school also influenced the diets of participants in non-cultural ways. Although this study examined culture I feel it is important to note the appreciation the students had for Oskayak; a school that provided two nutritious meals a day to them. "The school makes it easier to eat healthier; I get half of my food a day here" (P-7) stated one young man. In a conversation with the school nutrition programmer and cook I was informed that vegetables and salad are served with lunch every day. She stated that, "Vegetables and salad balance out the bad food they sometimes eat, such as pizza". She added, "You need to give the students these foods (pizza) sometimes, as a treat, because they are kids". Furthermore, she informed me that she

"...sees the students taking a lot of veggies". When I was in the cafeteria talking with students I noticed they were eating quite a few vegetables with their lunches. One participant commented, "The lunch room cooks good food, healthy food I think. There's a lot of vegetables and meat and bread and milk and water" (P-12). Although the food the school provided on a daily basis was not related to culture it was evident that the students were thankful for what the school provides. Giving thanks was a behaviour that was consistent among participants in this study.

Food sharing was an act that most participants and their families engaged in. Participants reported food sharing in two ways: the sharing of traditional food, and sharing to address food insecurity. Food insecurity refers to limited or uncertain availability of nutritionally adequate, safe, and acceptable foods due to financial resource constraint (Bickel, Nord, Price, Hamilton, & Cook, 2000). Many participants had experienced hunger due to food insecurity at some point in their lives, but never for prolonged periods of time.

Traditional food sharing was also very popular among participants and their families. "My Mushum (Grandfather) used to hunt but now he is sick. Now my uncle hunts and sends us meat" (P-3) said one participant when I asked her where she gets traditional foods. A young woman explained that her "...next door neighbour goes hunting, and when he has too much he gives us some" (P-1). Other students told of people going out of their way to give their family traditional foods without them asking. A participant told me that people phone her Grandma and "...ask her if she wants any meat and they will drop it off for her" (P-4). Further to this, another girl told me that, "My mom always sends us moose and deer meat" (P-12). In the past food was not gathered by Aboriginal peoples for individuals or families alone, but also for the benefit of the community. Thus, these methods of food procurement by urban Aboriginal peoples may be rooted in the ways of their ancestors.

Most participants discussed "borrowing" food or money for food from extended family to address food insecurity. "One month we spend all our money on rent and we just had to bum food off my stepmom's brother and he had a bunch of junk food" (P-10) said one participant.

Another participant said his family "...bummed food off of my uncle when we don't have money" (P-14). A young woman who lived on her own explained that, "I go to my sister's house and get food" (P-13). Another form of food sharing that addresses food insecurity was the utilization of various food banks. Most participants said that they had eaten food from the food bank at some point in their life; however, most said that the food was of very low quality. This will be further discussed in the subsequent section.

This study's findings on diet illustrate that although the young participants were living in an urban setting, many still had eating habits that were rooted in Aboriginal beliefs and behaviours. The sharing of food was evident in the everyday habits of the young men and women, and was influenced by family and school. Traditional food was believed to be healthy and had many other benefits, such as fostering a sense of belonging and community. Again, family and school positively influenced the beliefs and behaviours surrounding traditional food.

3.1.4 The Struggle

"Lower the prices on healthy foods. I think that's what people struggle with the most" (P-7).

In this study barriers to healthy eating and physical activity were of great interest. Often participants would discuss barriers in interviews without being prompted. The young men and women talked of the "struggles" they faced, and often shared their experiences in stories that told of how they overcame many challenges. The way the participants often described barriers implied that they were fighting to stay healthy, despite the obstacles the faced. Three key barriers to healthy eating and physical activity were identified by all participants: income, location, and

transportation. All three of these barriers stemmed from poverty, a condition where basic needs are not met.

Place of residence was a poverty related barrier to physical activity for the young men and women in this study. All of the participants except two lived in low-income neighbourhoods on the West-Side of Saskatoon. Participants often referred to the area they lived in as "the ghetto". One participant explained, "...it's dangerous there. That's why we go down to the bridge and jog" (P-12) another participant stated, "You never know when someone is gonna come grab you" (P-3). I remember vividly a conversation with one of the male participants (P-7) when I asked him about his neighbourhood he told me, "I don't go in that area (referring to walking in his neighbourhood)" I probed with "Why?" and he replied, "Well it's the hood. Too many people being stupid, then they see me, white boy all in black". I probed further, "But you're not white?" and he replied, "I look white and that's all they look for. They don't stop and question they just say you're white so we're doing this to you because of that". I asked, "So it's not really safe for you to be outside there exercising?", "Not at all" he stated soberly. I asked a few teachers about the young man and I found out that he had a history of encounters with the police, but that he had been trying to keep himself out of trouble lately. However, he was still getting jumped when he was in his neighbourhood and was forced to defend himself. Consequently, he was still having some interaction with the police.

Some participants felt that not having enough free sports programming for Aboriginal youth was a barrier to physical activity, as the participants' families did not have enough money to pay for sports. However, others felt that there was enough programming, but that Aboriginal youth did not take advantage of it. "They have so many opportunities and just throw it away. Like White Buffalo, YMCA and other youth centres" explained one participant (P-13). Another

participant helped me understand that young people might not know how to find the programs or they might not be informed about them. "There are quite a few (programs), but you have to know how to find them" (P-15). This finding may indicate that there are sufficient programs for low-income Aboriginal families but they are underutilized because the programs are not advertised in the best manner for Aboriginal youth.

In ethnography it is important to recognize the non-occurrences, particular beliefs or behaviours that do not exist. Thus, it is important to state that although there were barriers to physical activity for the participants, most felt that cold winter weather was not a barrier. I had chosen to ask a question about weather to determine if physical activity behaviours changed with the seasons. A young woman informed me that, "You just have to find different places to do them (sports), like you can go play basketball inside. Tag you can play in the gym and stay on the lines" (P-1). Another participant further explained that you find different activities and different ways to do activities in the cold. "We switch to indoor soccer, we can do basketball inside. I like to go skating" (P-9).

In regards to poverty and healthy eating, most participants who experienced food insecurity felt that income was an immense barrier to healthy eating. "I want vegetables and fruits and stuff like that but I can't fit them in the budget" said one participant who lives on her own. Others who live with parents or other family members said that, "At the end of the month we don't have enough money for healthy food when we pay bills and rent" (P-14). Moreover, when asked what would help people eat healthier one participant explained, "Lower the prices on healthy foods. I think that's what people struggle with the most" (P-7).

Food banks were often used by participants with low incomes. "It's hard for some people in the city to eat healthy because in those places that give out food you don't really get a choice

in what you get, you get what they give" (P-1). Participants frequently stated the food was inadequate. "Sometimes you don't get very good stuff" and "...its ugly food and expired" (P-13). The young men and women informed me there is rarely fresh produce and when produce is available it is often starting to go bad and there is little to go around "They (food bank) have some fresh stuff, but they're pretty cheap with it" (P-14).

Another barrier that was connected to income was the food served or kept in the house by family members. Some participants directly related junk food at their homes to the income of their parents. When I asked one young woman about what sort of groceries her family can afford she explained that, "Mom always says 'want some chips' and we're like no. It's hard because we say no but she brings all the chips home" (P-4). Another participant who is the mother of twin two-year-olds explained that, "...you have a budget to go by and sometimes you can't fit everything in the budget when you go to the grocery store" (P-6). She further explained that this affects what she can feed to her family "...they eat...just not what I want them to" (P-6).

Participants in this study explained that their place of residence was a barrier to healthy eating. The low-income neighbourhoods where the participants resided were not nearby any grocery stores. Thus, finding transportation to a grocery store was necessary to get healthy food. Many of the participants came from homes where the primary method of transportation was public transit and walking because they could not afford a vehicle. Participants said that taking the bus to the grocery store "...takes a long time", and they often "...had to wait outside for the bus and then pack groceries on the bus" (P-12). All of these tasks increased the difficulty of getting healthy food from the grocery store for the participants.

Although the participants did not live near grocery stores, they did live by many fast food restaurants and convenience stores. One participant explained, "I live by A&W, McDonalds,

KFC, and three other restaurants like that. So it's pretty hard (to eat healthy), lots of fatty foods" (P-14). Another participant illustrated that the problem is not just fast food restaurants "I live by a store. That's where I get chips and pop. It's a corner store, like a confectionary" (P-14). A young man acknowledged that there were some healthy items at the corner stores near his house, but making a healthy choice was the problem:

"You see a whole shelf of chips, and then beside it there is a little one with bread. That does make an impact, even if you do not realize it. Because then you're looking at the chips even though you need bread" (P-7).

It was apparent that the participants were very aware of the barriers that affected their ability to consume healthy food and engage in physical activity. Place of residence for participants in this study was related to poverty, as most lived in the poorest neighbourhoods in Saskatoon. Lack of transportation was related to poverty because the cost of purchasing and maintaining a vehicle was too high for most of the participants' families. Although the barriers the young participants faced were all related to poverty—something they could not control, many showed resilience in their attempts to overcome the barriers. Instead of letting the barriers stand in the way, many told stories of struggling to overcome the negative influences that affected them. For instance, when the participants could not be active in their neighbourhoods they would catch a ride, or take the bus to a place that was safer. They also chose to catch the bus to the grocery store, and pack their grocery bags back to their homes despite the time that it took.

The participants in this study believed that there were many different healthy body weights. Those who felt they had a healthy body weight believed it was because they were active and ate healthy. School and family were important cultural influences on physical activity and diet for the young men and women in this study. The results showed that the participants

engaged in traditional activities, and felt they were important to their health. Traditional food was enjoyed by many participants, and considered "healthy"; these young men and women desired to eat more traditional food. Evidently, culture was an important influence on the health of these urban Aboriginal youth.

CHAPTER FOUR

4.1 Discussion

Using ethnographic methods the present study identified many cultural influences on body weight, physical activity, and diet for urban Aboriginal youth. Prior to discussing the main findings, I will provide a synopsis of my personal experience conducting focused ethnography. Within the main findings section the cultural influences will be discussed and compared to relevant literature regarding Aboriginal youth. Lastly, the findings will be discussed and compared to Aboriginal worldviews, and the concept of enculturation along with its role in theory will be discussed.

4.1.1 On the use of Focused Ethnography

Prior to starting this study, I found that the literature on Aboriginal health provided inadequate insight into the complex lives of urban Aboriginal youth. Further to this, I could not find any literature that presented the voices of urban Aboriginal youth, especially in a cultural context. At the same time I was exploring literature on obesity and overweight and found that very few studies involved urban Aboriginal participants. Although my research interest grew to be about far more than overweight and obesity I still wanted to conduct research that had relevant value; as Aboriginal youth are more overweight and obese than their non-Aboriginal counterparts (Assembly of First Nations, 2007). I then found a method (focused ethnography) that fit both of my research desires, problem based research that was about culture and research that was exploratory in its nature.

Ethnographic literature states that the researcher is a key tool in ethnographic studies (Lecompte & Schensul, 1999). Within ethnographic studies there are often expectations of

reciprocity, help, assistance and participation in the social life of the community. I feel that I am naturally a social and helpful person and these qualities have been my strengths as a 'research tool' in this study. I have always found it easy to build relationships and tend to find some common grounds with most people I interact with. Further to this, I enjoy helping people particularly in a learning environment. These personal traits have made it easy for me to engage in reciprocity and participation in multiple ways throughout this study; this greatly benefited the end product. Although there are several advantages to conducting focused ethnography, there are still some difficulties that I encountered.

Concern about the brevity of the ethnographers contact with participants is a critique of focused ethnography (Mueke, 1994). If the researcher does not spend enough time with participants they will not be able develop trust or accurately give thick description (Mueke, 1994). Prior to starting my study, I had spent months in Oskayak with students and educators building trust and observing. I feel this time spend in the school, prior to the initiation of the study, addressed the common concern of lack of time on site.

The greatest risk of focused ethnographies is that the boundaries of their focus unknowingly exclude what is relevant. Problems emerge when the initial scope of the study is too narrow (Mueke, 1994). When I designed the study I wanted it to be very exploratory as to not encounter the above problem. As I collected data and started to analyze, I began to wonder if I was in over my head. I had hundreds of pages of transcripts, and countless categories that I needed to sift through. At times this large amount of data on multiple topics was overwhelming; however, in the end I realized that having a large quantity of data was essential in the writing of ethnography.

4.1.2 Main Findings

Throughout this study data from male and female participants was very similar. Without quote identifiers interview data from males and females might have been indistinguishable. I was surprised to see in my observational data that the both young men and women had very similar physical activity and dietary behaviors. In the gym, I saw equal numbers of young men and women playing sports at lunch and afterschool. In the lunchroom, both sexes chose similar foods, and similar quantities of those foods. This equality may be due to the influence of culture and family.

As stated in the findings, many of the participants grew up in families and communities that encouraged inclusive group physical activity. The female participants often told of growing up playing with their brothers and other male relatives. Thus, they may have developed the same preferences in physical activity as the males they grew up with. In regards to eating habits, the preference for traditional food by both genders may be because of the role traditional food plays in Aboriginal communities. Options for other types of food may not have normally existed in the past; therefore, both men and women learned to eat and enjoy the same foods. Additionally, for many participants food insecurity when living in the city was a reality, consequently food choice may not have been available much of the time for these young people. Acceptance of a wide range of body weights was influenced by culture, as many of the participants said this is what Aboriginal peoples believe. In this case, perhaps Aboriginal culture was a much stronger influence than current media influences, or other influences that affect youth's body size preference.

Participants in this study stated that there was diversity in healthy body weights and sizes; healthy body weights were different for every person. There was a general level of body size

satisfaction among the young men and women who participated in this work. This study's finding on body weight satisfaction was consistent with the findings of Fleming et al. (2006), who looked at the body-related emotional experiences of urban Aboriginal female youth from Saskatoon and found that participants experienced acceptance and satisfaction with their bodies. Both the present study and Fleming et al. (2006) had urban Aboriginal participants from Saskatoon, used qualitative methods, and had findings that are inconsistent with most of the previous research. One difference between Fleming's study and my study is that my study involved male and female participants. All males in the study reported being satisfied with their body weight and believed there was great diversity in healthy body weights.

Although my findings were consistent with the findings of Fleming et al. (2006), they contradicted most of the previous studies on Aboriginal peoples body image. Most previous research describes a general level of body dissatisfaction with Aboriginal youth (e.g., Gittelsohn et al., 1996, Hanley et al., 2000; Marchessault, 2004; Rinderknecht & Smith, 2002). In Fleming et al. (2006) the author described how the young women's emotions were situation specific; how they felt about their bodies was different in different situations and when different people where viewing them. The findings of my study could also be related to the context in which the participants were interviewed. Due to my volunteer work at the school I had developed strong relationships with most participants, and this helped to facilitate a relaxed and comfortable environment during interviews. Thus, participants may have felt better about their bodies when discussing them with me, an individual with whom they felt at ease with.

The literature on minority populations indicates that Black and Hispanic populations have higher levels of body size satisfaction despite higher body weights (Cachelin, Rebeck, Chung & Pelayo, 2002). There is limited research on minority male body image, but the majority of

studies that exist show that there is not a difference between ethnic minority males and whites on body satisfaction (Cachelin et al., 2002). Many female ethnic minority participants believe they had smaller body sizes than they actually do (Cachelin et al., 2002); this may be another rationale for the body size satisfaction of the participants in my study. However, it may be more likely that the high body satisfaction among my studies participants was due to their health enhancing behaviors.

The participants in this study who thought they had healthy body weights often stated that they tried to be physically active and eat healthy. This finding is supported by data from the Urban Aboriginal Peoples Study (2010), which found that 85% of participants surveyed believed that physical activity was an important determinant of health and 76% of participants believed that diet was an important determinant of health. This finding is noteworthy because it may indicate that eating healthy and being physically active positively enhances self-image for urban Aboriginal youth. In the teen years self-image and self-esteem are important determinants of mental health, particularly for Aboriginal youth (Rinderknecht & Smith, 2002).

The young men and women in this study participated in many physical activities, but enjoyed group physical activity the most. This emphasis on the social connections that groups can offer was consistent with the results from a larger national study, which found that Aboriginal youth enjoy team sports (Assembly of First Nations, 2007) and is further supported by Thompson et al., (2000), whose findings showed that sport and everyday activities that are socially oriented positively affected the balance of important social connections in urban Aboriginal peoples in Australia. Nelson (2009) also found similar results as many of the Australian urban Aboriginal participants in her study felt that physical activity connected them with their family, friends, and community. Aboriginal worldview places great importance on

family and community (Government of Alberta, 2010). In the 2010 Urban Aboriginal Peoples Survey, the vibrancy of Aboriginal communities within Canadian cities was highlighted. If urban Aboriginal youth are being raised to value community and family, physical activity is a perfect vehicle to instill these values. It could be presumed that if these youth are raised to value inclusive group physical activity, then they will grow to be adults that value family and community.

In addition to taking pleasure in group physical activity, most participants enjoyed some level of competitive sport. This finding was consistent with two Australian studies on urban Aboriginal peoples and physical activity preference. Hunt et al. (2008), found that adult participants enjoyed competitive sports such as rugby, netball, and football. A study conducted in an urban Australian community also found that organised sport was favoured by Aboriginal youth participants "...because you can go in competitions and be in a team" (Nelson, 2009, P. 105). Nelson (2009) found that many young people spoke of winning as both a motivation for and reward from playing sport. Lastly, a study with urban Aboriginal female youth who were involved in organized sport in Saskatoon revealed that one of the key reasons participants played organized sport was for competition (Smyth & Humbert, 2009). The findings from previous studies, and this study indicate that future programming for urban Aboriginal youth should incorporate competitive activities and events. This desire to be involved in competitive sports may indicate a desire for belonging. Although group physical activity can foster a sense of belonging, competitive group sports may offer an opportunity to have a shared goal. To achieve that goal, individuals must play and practice together for prolonged periods of time on a regular basis. This large amount of time spent together, to achieve a common goal, can give young athletes a sense of attachment and association that they may not otherwise have.

In addition to participating in mainstream sports, most youth in this study took part in traditional physical activities such as dancing, hunting, fishing, and drumming. This finding was consistent with the First Nations Regional Longitudinal Health Survey (Assembly of First Nations, 2007) which found that Aboriginal youth participate in traditional physical activities. However, it is important to note that the First Nations Regional Longitudinal Health Survey involved youth living on-reserve or in rural areas (Assembly of First Nations, RHS, 2007). My study may be one of the first Canadian studies to investigate and discover urban Aboriginal youth enjoy traditional physical activities. The only study that previously looked at traditional activities and urban Aboriginal youth was a smaller study done in Australia (Nelson, 2009). Nelson's study found that dancing was done by many young women as a way to connect to culture, which supports findings of my study. Given that the youth in this study were all living in a city, it may have been more challenging for them to engage in their culture, compared to youth living on-reserve. Participation in traditional physical activities may have been a way for these young people to remain enculturated.

Not only did participants enjoy traditional physical activities, they also believed that they were very important for maintaining and increasing health. When participants were involved in traditional activities such as powwows, round dances, and feasts they recognized that they had higher levels of physical activity and often ate healthier food. Many participants felt that these activities also supported their mental and spiritual wellbeing. There is mounting evidence that participation in traditional activities can be a protective factor against adverse health conditions such as depression and substance abuse (McIvor, Napolean, & Dickie, 2009). However, a recent review determined that very few studies have examined other health benefits of traditional activity for urban Aboriginal peoples (McIvor et al., 2009). Furthermore, to my knowledge there

are no studies that look at the health benefits of traditional activity among urban Aboriginal youth; thus, this is an area of research that needs to be further investigated.

Most participants discussed the importance of traditional physical activities as part of their culture (e.g. dancing), but they did not classify contemporary sports they played (e.g. basketball) as part of their culture. This finding contradicts a study in Victoria that found that athletics was an important aspect of culture that had a powerful positive impact on the young Aboriginal peoples who took part in certain sports (Riecken et al., 2006). In some communities non-Aboriginal sports have evolved into traditional physical activities because they have their own Aboriginal styles, for example in basketball in Northwestern BC and soccer on Vancouver Island (McIvor et al., 2009). When I worked as a Program Coordinator for Aboriginal Sports and Recreation B.C. I observed how basketball and soccer were perceived as traditional Aboriginal activity. When attending sports events I often saw how Aboriginal spirituality was woven into the events. For example prayers to the Creator were often said by teams before events, unique phrases were developed from Aboriginal words that described different sports terminology, and aspects of Aboriginal art were used for trophies and jerseys. Although investigating contemporary sport as a traditional physical activity was beyond the scope of this study it would be interesting to explore this in greater depth with urban Aboriginal youth. If youth do see some contemporary sports as cultural, this may be a way to engage more youth in cultural activities. Aspects of Cree, Dene, Metis (along with other First Nations groups) culture could be taught to Saskatchewan Aboriginal youth through many contemporary sports, such as at the North American Indigenous Games.

In addition to enjoying traditional forms of physical activity, participants enjoyed traditional foods and believed traditional foods were very healthy. Many participants felt that

they would like to eat more traditional foods. These findings were consistent with the findings of Gittlesohn et al. (1996) who found in an Ojibway-Cree community that there was a perceived healthiness of "Indian Foods". A subsequent study by Gittlesohn et al. (2010) discovered that an Inuit population in Nunavut also perceived country foods (traditional food) as healthy. Participants in my study also enjoyed eating traditional foods because they were associated with family and celebration. This finding supported previous research by Thomson et al., (2000) who found that urban Aboriginal peoples in Australia enjoyed eating foods that were symbolic of family and culture and took a long time to prepare, such as food used in celebrations.

Although my findings were consistent with existing literature, it is important to note there is a lack of literature that looks at traditional foods beliefs and behaviors in urban Aboriginal populations and in Aboriginal youth (McIvor et al., 2009). To my knowledge this was the first study that examined urban Aboriginal youth beliefs and behaviors on traditional foods in Canada. Given that the youth in this study enjoyed traditional food and desired more of it, effort to increase availability of traditional food for urban Aboriginal peoples may be an important future direction. Some participants in this study already engaged in hunting and fishing with their family, and enjoyed these activities. Possible training for more Aboriginal youth on hunting, fishing, and gathering for the attainment of traditional food might be an avenue to explore.

The participants in the present study believed that eating traditional foods was healthy, and evidence does exist to support the theory that eating a traditional diet can be healthier than eating non-traditional foods. Most traditional foods are unprocessed and high in nutrition (Milburn, 2004). Wild game meats are higher in iron than pork, moose and deer meats are also lower in fat and higher in protein than beef, and game contains no antibiotics or hormones (McIvor et al., 2009). Fish contains a large quantity of high quality omega-3 fatty acids (McIvor

et al., 2009). Another advantage of traditional food is affordability. Many urban Aboriginal peoples, including this study's participants, live at or below the poverty line and are forced to shop for low end commercial foods (Willows, 2005). Even when the increased cost of fuel, ammunition, and supplies are factored in the cost is still cheaper to harvest traditional foods (McIvor et al., 2009). Thus, making traditional food available for urban Aboriginal peoples may possibly be a way to address to food insecurity due to poverty and increase the nutritional quality of food consumed.

Another way that Aboriginal peoples have addressed the effect poverty had on food attainment is through food sharing (Willows, 2005). In this study the participants and their families engaged in food sharing to address food insecurity and to get traditional foods. This is consistent with previous literature that found that Aboriginal peoples engage in the sharing of traditional food and non-traditional food to address food insecurity (Gittlesohn et al., 2010; Willows, 2005). Participants and their families in this study had food sharing networks to specifically obtain traditional food such as meat from residents on their home reserves. Most literature on successful food sharing has been with Aboriginal peoples who live on-reserve or in remote locations (Willows, 2005). There may be less effort required to share traditional foods in reserve or remote locations because individuals do not need to organize the transportation of the food over long distances. For example wild game would already be in the remote community and when it was harvested it would be brought to a local community freezer (Willows, 2005). Participants in my study who engaged in sharing traditional food explained a more complex process of getting food from their reserves to the city; the process involved packing the food and then finding a way to send it to the city. Thus, more effort and planning was required to share traditional foods between the city and a reserve community. This highlights the strong desire that some urban Aboriginal peoples have for traditional foods and the ingenuity necessary to get these foods. The findings from this study could also suggest that food sharing is a characteristic that some urban Aboriginal peoples have retained from when they lived on-reserve, as many of the participants and their families had lived on a reserve at some point in their lives.

The urban Aboriginal high school that all the participants attended played a significant role in the participants' healthy eating habits and physical activity. Oskayak offered the students two nutritious meals a day, many different opportunities for physical activity, and helped them maintain their cultural identity by teaching them about their culture and providing traditional activities. Furthermore, the participants felt the school offered large amounts of encouragement to be physically active. Teachers and administrators were always encouraging the students to go the gym or weight room in their free time and join a sports team or club. The participants believed this encouragement helped them stay motivated to do physical activity, and it created an atmosphere that was conducive to health enhancing behaviors.

The above findings are consistent with the current literature on the role that schools play in the health of students. The school environment plays a critical role in nutrition and physical activity patterns of youth, due to the amount of time the students spend at school and their exposure to food and physical activity opportunities while on site. Schools have been identified as a setting for promoting healthy eating and physical activity behaviors among young people (Active Healthy Kids Canada, 2010). The findings from this study illustrate that the school can also be a place that promotes culturally specific values towards healthy eating and physical activity.

The family played a large role in the promotion of physical activity, healthy eating, and cultural knowledge for the participants in this study. Most young men and women indicated that

when their families were active, they were active. There was also an emphasis on sports and competition within the families. These findings are consistent with the results from Nelson (2009), who found with urban Aboriginal Australian youth family appeared to heavily influence participation in both organised sport and physical activity. Another study with urban Aboriginal participants in Australia looked at strategies to increase physical activity (Hunt et al., 2008); findings showed that participants felt there was a need to provide opportunities for families to be active together reflecting the importance of family in Aboriginal culture. Findings from this study and previous studies with Aboriginal youth may indicate that future physical activity programming for Aboriginal peoples should attempt to incorporate the entire family. Health promotion material should also continue to encourage physical activity within the home. Furthermore, it may be advantageous for this material to feature Aboriginal peoples and families, as most of the current material promoting at home physical activity features non-Aboriginal peoples. Participants often explained that family physical activity happened in the back yard, on the street, or in a park nearby. Many families were very busy with more than one generation working, and some family members working more than one job. Thus, encouraging physical activity that does not require transportation and time to and from programming might be well suited to this population.

Participants also acknowledged that their family was the main influence for dietary habits, including the consumption of traditional food. Participant's whose families cooked traditional food said they enjoyed traditional food, ate traditional food more often, and helped assist in its preparation. This finding is comparable to the results of Thompson et al. (2000) who, in an ethnographic study looking at the beliefs and behaviors of urban Aboriginal peoples in

Australia, found that family was central to every aspect of food, including choice, preparation, and what it represents.

Although there were many optimistic findings in this study, it is clear that poverty was a barrier to healthy eating and physical activity for the participants and their families. This finding is consistent with much of the literature on barriers to health for Aboriginal peoples in Canada (Waldram et al., 2006). One quarter of Aboriginal peoples in Canada experience food insecurity due to lack of money (Che & Chan, 2003). Because participants sometimes experienced food insecurity they had to eat whatever food they could get. Often these foods were low quality foods such as snack foods and highly processed foods. A recent study on the eating habits of offreserve Aboriginal peoples reported that Aboriginal peoples are significantly more foods from the "Other" food group on Canada Food Guide than non-Aboriginal peoples. Other foods included soft drinks, pizza, snacks (such as chips), along with many other items (Garriguet, 2008). Income and education level were directly related to the poor eating habits of the participants surveyed (Garriguet, 2008). This indicates that increasing opportunities for urban Aboriginal youth to attain higher levels of education is an important step to addressing poverty. Higher levels of education usually translate to higher incomes. With higher incomes more choice exists on what types of food is purchased.

Another common barrier to healthy eating was the location of the participants' place of residence. The homes of the young men and women in this study were located in low-income neighborhoods in Saskatoon that were nearby multiple fast food restaurants. The young men and women also lived a considerable distance away from grocery stores. This relationship between low-income homes and distance to fast food outlets and grocery stores is consistent with findings from a recent study done in Edmonton, Alberta. Findings showed that in Edmonton the odds of

exposure to fast food outlets, were greater in areas with more Aboriginal peoples, renters, lone parents, low-income households, and public transportation commuters; and lower in those with higher median income and dwelling value (Smoyer-Tomic et al., 2008). Furthermore, in the study conducted in Edmonton low wealth, renter-occupied and lone parent neighborhoods often had very few grocery stores. It has been suggested that enacting zoning laws to regulate the ability of fast food restaurants to cluster in certain areas might encourage a greater range of healthy food retailers to enter particular neighbourhoods (Smoyer-Tomic et al., 2008); such an initiative might prevent the further clustering of fast food restaurants in Saskatoon's low-income areas.

Lack of transportation was a repeated barrier to healthy eating for participants and their families because they did not have enough money to purchase or maintain a vehicle. This finding was similar to other findings on low-income urban families. Many urban low income families cannot afford a vehicle and use public transport as their primary method of transportation (Kumanyika & Grier, 2006). Although public transportation exists in Saskatoon, it may not be an attractive option for transportation for many because of the length of time it takes to travel on public transportation. Most participants felt that the time it took to get to the grocery store on transit busses was too long. If more express or direct routes to major supermarkets were developed this problem may be partially addressed.

Many participants felt that where they lived was a barrier to physical activity, as many felt that their neighbourhoods were unsafe. A review on neighbourhood safety and physical activity found that low levels of active transport and physical activity among children in their neighbourhood was associated with a lack of perceived neighbourhood safety (Carver, Timperio, & Crawford, 2008). However, most studies have recorded only perceptions of safety, rather than

objective measures (Carver et al., 2008). Although my study does not objectively measure crime in the participants' neighborhoods it is know that Saskatoon has a higher crime rate than all other metropolitan areas in Canada since 1991 (Statistics Canada, 2008).

Further to this, in 2001 the downtown area and the central neighborhoods of Riversdale and Pleasant Hill, located on the west side of the South Saskatchewan River, accounted for large portions of all types of crime in Saskatoon (Statistics Canada, 2008). To a lesser degree, the Confederation shopping area and the commercial strips on Idylwyld Drive, 8th Street and 33rd Street, also represented crime hotspots (Statistics Canada, 2008). All but two participant lived in these listed neighborhoods; thus, it is probable that their perception of violence and crime in their neighborhoods is accurate. Focusing on decreasing crime in these neighbourhoods may increase the amount of physical activity in these neighbourhoods (Gomez, Johnson, Selva & Sallis, 2004).

There are few studies that examine physical activity barriers in neighbourhoods where crime has been objectively measured; I have identified two recent studies where this has occurred. My study's findings are consistent with the findings of a study done in Washington, D.C (Roman & Chalfin, 2008), which found that levels of violence and the presence of gangs were positively associated with fear/avoidance of walking outside. My study is also consistent with the findings of a study done with female urban Mexican-American youth, which found that neighborhood violent crime may be a significant environmental barrier to outdoor physical activity (Gomez et al., 2004). Only a small number of studies objectively measure crime and physical activity; this signifies a paucity of research using behavioral and crime-specific measures to examine the relationship between real and perceived crime-related risks and physical activity (Foster & Giles-Corti, 2008). Future research may want to objectively measure the

relationship of crime and physical activity in Saskatoon to better determine if crime is a significant barrier to physical activity for different demographic groups across the city.

Participants in this study varied in opinion on whether lack of sports programming available was a barrier to physical activity. Some young men and women felt that there was not enough programming for Aboriginal youth, whereas others felt that the issue was lack of advertisement for existing programs. This discrepancy is consistent with the findings of the Report Card on Physical Activity for Children and Youth (Active Healthy Kids Canada, 2010). This report found that a variety of appropriate programs exist for youth in different neighborhoods across Canada, but that less than half of Canadian youth use community amenities and programs that are available to them to be physically active (Active Healthy Kids Canada, 2010). Recommendations for action in this report are consistent with the requests of the participants in this study. The students in this study believed that more young Aboriginal peoples would engage in recreational programs if they were better advertised. Thus, community recreation leaders should consider increasing resources allocated to advertising and recruiting participants in order to attract people to use the programs and facilities in their neighborhood (Active Healthy Kids Canada, 2010).

An interesting finding of my study was that participants did not cite weather as a barrier to physical activity. The young men and women explained the many options that they have and the adjustments they make to continue to be active in the winter. This finding is inconsistent with the literature on physical activity barriers in Canada (Spence, Cutumisu, Boule, & Edwards, 2010). A recent review found that physical activity levels of children and youth were affected by season in 83% of the studies (Spence et al., 2010). Future research should further investigate

what physical activities are done by urban Aboriginal youth in the winter and consider promoting those activities in Canada during the winter months.

4.1.3 Aboriginal Worldview and Enculturation

The young men and women who took part in this study held similar perspectives on health as many Aboriginal peoples in Canada. Although Aboriginal culture is very diverse in Canada, there are some similar worldviews held in common by many Aboriginal peoples in North America (Four Worlds, 2006). In this study there appeared to be an interconnectedness between the influences on the beliefs and behaviours of the participants regarding body weight, diet and physical activity. Family, community, and school influenced all three of these variables in very significant ways, and the participants felt that these influences were very important in their culture. This finding supports the belief of many Aboriginal groups in Canada that interconnectedness is a key aspect of health (Government of Alberta, 2010).

The Aboriginal perspective on interconnectedness also relates to the four elements of health that many Aboriginal peoples believe well-being is made up of. The four components of health are mental, emotional, spiritual, and physical, and they make up the Medicine Wheel (Hunter et al., 2006). These four components are interconnected, and good health cannot be achieved without all four working together (Four Worlds, 2006). The health benefits of the cultural activities that the young men and women in this study participated in were not seen as just physical health benefits. Cultural activity also benefited the participants' mental, emotional, and spiritual health. Thus, many young men and women understood the interconnected role that all four of these components played in maintaining good health.

There is not only a need for all four of these components to be present, there also needs to be a balance between them. If balance is not maintained, an opening for sickness is created

(McIvor et al., 2009). It appeared that many young men and women in this study understood that good health was achieved by maintaining a balance of these four elements. Some participants mentioned that cultural events helped them achieve balance. This further demonstrates that these urban Aboriginal youth had similar perspectives on health as many other Aboriginal peoples.

Another similarity between the beliefs of the urban Aboriginal participants in this study and Aboriginal worldview is the value of elders. Participants in this study felt that elders in the community, school, and family helped them understand their culture. Most Aboriginal groups in Canada highly value elders as knowledge keepers (Four Worlds, 2006). Interestingly, participants in this study not only valued elders for their knowledge and the role they play teaching them about culture, but also for the more tangible assistance they give. For example, participants were thankful for their grandparents and other elders who drove them to powwows or helped them make their regalia.

The above examples confirm that many participants in this study had beliefs that aligned with Aboriginal perspectives on health. Aboriginal peoples who hold these traditional perspectives on health often are individuals who are encultured. Enculturation is defined as the degree to which an individual is maintaining one's cultural identity by embedding oneself in traditional cultural norms and values (Whitbeck, Chen, Hoyt, & Adams, 2004). It appeared that most of the young men and women in this study were encultured individuals. Furthermore, many participants stated they learned about Aboriginal perspectives on health from engaging in cultural activities and talking with elders.

There is some research that indicates that enculturation can be a protective mechanism against ill health (McIvor et al., 2009). A review by McIvor et al. (2009) showed that there are a few in-depth studies examining the influence of culture on health. These studies indicate that

enculturation has a positive influence on health. Enculturation has been shown to act as a protective mechanism against alcohol abuse, depression, and suicide (McIvor et al., 2006). However, there is lack of research investigating enculturation as a protective mechanism against other forms of ill health, such as chronic disease. Furthermore, there is an absence of studies that focus on urban Aboriginal peoples and enculturation as a protective mechanism (McIvor et al., 2006).

As stated earlier, ethnography can lead to the development of a theory about how people think, believe, or behave that is situated in local time and space (Lecompte & Schensul, 1999). Theory, by definition is a systematic explanation of an event in which constructs and concepts are identified and relationships are proposed or predictions made (Morse & Field, 1995; Mueke, 1994). These theories can provide a basis for hypothesis, hunches, or interpretations, even in other settings (Lecompte & Schensul, 1999). This study was a type of ethnography, but it was not a traditional ethnography. Because focused ethnography is smaller scale ethnography, and it is problem focused, it may not have the ability to generate theory. However, it can notably contribute to an existing theory, or a theory that will potentially be developed. Thus, the findings from this research can contribute to the developing theory and discourse on culture as a protective mechanism to ill health.

I began to theorize this relationship when I noticed that the participants who stated they had a healthy body weight and good health were often the ones who felt that culture and cultural activity were very important to them. Many participants who felt culture was important participated in cultural activities. Several of these activities increased their physical activity levels and healthy eating habits. Many young men and women danced or drummed at powwows and round dances. Participants also ate traditional foods at feasts and in their homes. There is

evidence that traditional foods are healthy and protect against many chronic diseases (Milburn, 2004). Some male participants also engaged in the hunting and gathering of traditional foods. Evidence exists that the hunting and gathering of traditional foods increases physical activity, and is associated with better spiritual health (Milburn, 2004). Participants also took part in spiritual activities such as smudges, sweat lodges, and pipe ceremonies, all of which have been proven to enhance spiritual health (Fleming & Ledogar, 2008). For the young urban Aboriginal participants who took part in this study, engaging in cultural activity enhanced their health.

Most of the young men and women believed that they had healthy body weights; this in itself is an indicator of good health (Neumark-Sztainer et al., 1997). Current literature shows that concerns about body weight have been associated with several health compromising behaviors such as dieting and eating disorders (Goldschmidt et al., 2008). Furthermore, many participants associated their acceptance of diverse body weights with their culture, (e.g "My culture doesn't care what size you are"). Thus, being connected to ones culture could result in a more accepting attitude to body weight, and therefore better mental health.

The participants in this study believed, for the most part, that they had good health. They believed that they ate relatively healthy when they had the means to, were physically active, and had healthy body weights. Their behaviours demonstrated their engagement in many health enhancing activities, and many of these activities were rooted in cultural beliefs. These findings indicate that enculturation may enhance the overall health and healthy body weights of urban Aboriginal youth. Although barriers were identified, participants attempted to overcome them when it was possible, which highlights a resiliency among urban Aboriginal youth. Resiliency is the ability to overcome change or hardship and make positive adaptations. The recent Urban Aboriginal Peoples Survey (2010) states that many Aboriginal populations in Canada face

substantial challenges; however, the picture in cities is more diverse and hopeful than often acknowledged. I hope that my research serves to further emphasize the notion that urban Aboriginal youth hold many positive health behaviours and beliefs that are strongly tied to culture.

CHAPTER FIVE

5.1 Summary and Conclusion

Currently there is a paucity of research on the influence of culture on body weight, physical activity, and diet for urban Aboriginal youth. Culture is seen as the beliefs, behaviors, norms, attitudes, social arrangements, that form patterns in the lives of members (LeCompte & Shensul, 1999, pg. 21). The overall purpose of this study was to explore the influence of culture on urban Aboriginal youth regarding body weight, diet and physical activity. Focused ethnography was the methodology used in this study. Multiple methods of data collection were used including: interviews, observations, informal conversations, and a talking circle. Fifteen participants participated in the interview, four males and 11 females. The four themes developed were: acceptance of our bodies, playing together, past and present, traditions and sharing, and the struggle.

The young urban Aboriginal participants in this study believed that a healthy body weight can be reflected in a variety of sizes. There was a general acceptance in the diversity of healthy body weights and sizes. This finding may suggest that urban Aboriginal youth are more accepting of different body weights and sizes than previous literature has shown. Participants who felt they had healthy body weights were often the same participants who believed that they ate healthy and were physically active. This relationship might indicate that Aboriginal youth who are active and eat healthy may have higher body image satisfaction and consequently, better mental health.

Group physical activity and competitive activity was favoured among participants.

Traditional physical activities such as dancing, hunting, and fishing were cited as important by all participants. For the participants, traditional activity was about far more than just being

active; it was about practicing creativity, learning about heritage, confirming identity, and experiencing spiritual growth.

Participants believed traditional foods to be healthy and desirable, and those who reported eating traditional foods less frequently desired to eat them more often. Food sharing networks consisting of friends and family were reported as a way to address food insecurity and acquire traditional foods. These findings highlight the complexity of food procurement, cultural influence and food preference for Aboriginal youth living in urban areas.

In this study barriers to physical activity and healthy eating for urban Aboriginal youth included income, location or residence, and transportation. All of these barriers stemmed from poverty, a condition where basic needs are not met (Statistics Canada, 2010). Although barriers were identified, participants worked to overcome them whenever possible; this highlights a resiliency among urban Aboriginal youth.

Many of the participants in this study felt they had good health, and had healthy body weights. These same participants also felt that culture and cultural activity was important because cultural activities increased their healthy eating habits and physical activity levels, and improved their spiritual and mental health. These findings indicate that engaging in cultural activities may enhance the health of urban Aboriginal youth.

5.1.1 Strengths and Limitations

The main strength of this work is its contribution to the literature. The previous studies examining beliefs and behaviours on body weight, physical activity, and diet have primarily focused on females, children, adults, and rural or on-reserve populations (McIvor et al., 2009; Waldram et al., 2006; Willows, 2005). At present, there is lack of literature focused on urban Aboriginal youth.

There is a need for health research with Aboriginal groups in Canada to be locally and geographically specific in order to capture the rich diversity of social, economic, political, and environmental variances (Waldram et al., 2006). Thus, the findings of previous studies involving rural or on-reserve Aboriginal peoples may not be transferable to an urban Aboriginal population in Canada, or more specifically Saskatchewan. Furthermore, the voices of urban Aboriginal youth and the perspectives and views they have regarding health issues are currently absent from Aboriginal health literature (UAPS, 2010; Fleming, 2006). Lastly, much of the research on urban Aboriginal groups is portrayed through a problem lens, which often masks the positive beliefs and behaviours of urban Aboriginal peoples (UAPS, 2010). My study addressed the previous gaps in the literature on body weight, physical activity, and diet by working with both male and female urban Aboriginal youth to present their voices in a positive light.

Another important strength of this study was its methodology. This study used the qualitative methodology of focused ethnography, which is seen as an acceptable method for research with Aboriginal peoples (Clark, 1997). Ethnography promotes relationships, reciprocity, and ongoing communication in a research project; qualities that are important in Aboriginal research as they are consistent with Aboriginal worldview and community ethics (Castellano, 2004).

As described above, the strength of this study was its contribution to the literature on urban Aboriginal youth. However, as with all studies there are limitations. A common criticism and possible limitation of ethnographic work is that it lacks breadth (Myers, 1999). This lack of breadth leads to in-depth knowledge about one particular group, which cannot be easily utilized in other settings (Myers, 1999). This concern can be responded to in two ways. My first retort to this common criticism is that when there is an obvious lack of research about a sub-population

(e.g., urban Aboriginal youth), then in-depth knowledge about the group is necessary. My second response to this possible limitation is that if thick description is used when writing the ethnography, transferability of certain pieces of knowledge to other settings may be possible. In this study I have attempted to use thick description to assist the reader in determining if this research is transferable to another setting. However, like other qualitative work, the transferability lies in the hands of the reader.

Another methodological limitation that is common in focused ethnography is lack of time spent in the research setting by the researcher (Mueke, 1994). This lack of contact with participants could jeopardize the development of participant trust and the researcher's ability to provide thick description (Mueke, 1994). For my study I have spent 10 to 15 hours a week at Oskayak for eight months. During this time I felt I had developed trust with participants and had spent enough time on site to offer a rich description to the reader. However, more time on site may have provided me with an even stronger understanding of the beliefs and behaviours of urban Aboriginal youth.

The lack of males interviewed in this study (4 males) is a further limitation. I attempted to recruit both male and female participants equally; however, more females came forward as potential participants. I used snowball method (Patton, 2002) to recruit participants who did not come forward right away; three males were recruited this way. Teachers and female participants recommended the three males because they felt that these individuals matched my requests for participants with varying physical activity levels, different socioeconomic backgrounds. I also knew the young men through my classroom volunteering experience. All three males I approached agreed to participate. After the interviews I asked the male participants if they could think of any other young men who might like to participate. One said he could not think of

anyone and two recommended a few other potential participants. The few names that I did get I pursued, but the potential participants were not interested. Although there were not as many males as females in my study, there was a consistency in the findings between the four young men and those findings were also consistent with the findings from the female participants.

Consent may also be viewed as a limitation in this study. Often interviews were put off for large amounts of time because participants would forget to get consent signed by their parents or guardians. In some instances the participants were temporarily not staying with their parent or guardian. Other participants' parents and guardians were working when the participants were at home after school, and in the evening. Likewise, some participants worked after school or in the evening, and did not see their parents and guardians often due to this. For these above reasons there were a few participants that I would have liked to interview, but could not. These potential participants, which I was not able to recruit, may have provided further insight into the complex lives of urban Aboriginal youth. Their home lives may have been different than the participants who easily got consent signed, and because of this they might have had different beliefs and behaviours. Thus, the findings of this study may not be transferable to all urban Aboriginal youth, particularly those who may have more complex family and home dynamics.

5.1.2 Recommendations for Future Research

Based on the findings of this study I have several recommendations for future research. There is a need for more descriptive qualitative research on the beliefs and behaviours of urban Aboriginal youth, as it relates body weight, physical activity, and diet. Although a few national studies exist they tend to have relatively simple interview questions whereas, smaller qualitative studies usually employ more intensive methods, providing a more detailed picture of beliefs and behaviors (Young & Katzmarzyk, 2007). Qualitative data can give insight into why individuals

behave the way they do, and how specific factors and beliefs influence their behaviors. This information can then be used to develop health promotion programs and services tailored to the needs of urban Aboriginal youth. To my knowledge, this study was the first to look in depth at the beliefs and behaviors of urban Aboriginal youth in Canada. Much of the literature that informed this study came from Australian studies with urban Aboriginal youth. Thus, more qualitative Canadian studies are needed on the beliefs and behaviors of urban Aboriginal youth.

Through the development and use of ethical guidelines for research with Aboriginal Peoples, researchers are attempting to ensure that past wrongdoings are not repeated. These guidelines, such as CIHR's Guidelines for Health Research Involving Aboriginal peoples (2008) have been developed from the longstanding ethics of Aboriginal peoples. In this project I have developed reciprocal relationships, and have been involved in the community (Oskayak) for a prolonged period of time. In the future, research needs to continue to not only follow ethical guidelines for research with Aboriginal Peoples, but become cognizant of why those guides were developed, and with what Aboriginal worldviews and ethics they are developed from. By understanding that Aboriginal communities have longstanding ethics, and have always conducted their own research, researchers may gain a better understanding of why the current guides have been developed, and why it is vital to the community that they be followed. In addition to understanding ethics, future research needs to continue to benefit the community in which it the research is being done. Aboriginal communities have always done their own research to benefit their own people (Costello, 2004) and this needs to be continued.

More Aboriginal Peoples in Canada are living in, and moving into urban areas (Statistics Canada, 2008). As this trend continues there will be an even larger need for research with urban Aboriginal Peoples. In Canada, there are many differences between urban, rural, and on-reserve

communities. Thus, generalizations cannot be made about the experiences of youth in rural communities to youth in urban communities. There are challenges to engaging urban Aboriginal Peoples in research, such as participant recruitment and retention. However, there are ways to address these potential challenges. Aboriginal peoples in urban areas still have a strong sense of community (UAPS, 2010) and gather together at many places. Recruitment through Aboriginal community organizations such as Friendship Centers, youth centers, schools and other urban Aboriginal associations could assist in addressing recruitment and retention issues.

There is also a need for more research on cultural engagement as a health enhancing mechanism. Few studies actually examine the role that culture plays in health, yet there is a plethora of research calling for culturally appropriate programs and services (McIvor et al., 2009). The studies that do exist show promise; research has illustrated that enculturation can be a protective mechanism against suicide and depression. Enculturation now needs to be looked at in terms of increasing physical activity and healthy eating habits. Furthermore, enculturation needs to be looked at in urban Aboriginal peoples. Given that the majority of Aboriginal Peoples in Canada now live in cities (Statistics Canada, 2008), it is important to understand how they retain their cultural heritage, and if it assists in protecting them from ill health. Quantitative methods that control for other variables, and have larger sample sizes will be needed in future studies that look at enculturation as a protective mechanism.

The results of this study indicate that competition and sport are enjoyed by urban Aboriginal youth. Participants of both genders and of all ages believed that competition was a good thing. The participants in my study grew up in families where sport and physical activity competitions were favored. Some participants thought there should be more competitive sport programs available; yet, others said there were enough programs and they just need to be better

advertised to Aboriginal youth. How to best advertise and promote programs to Aboriginal youth should be investigated in the future. Additionally, future endeavors should continue to address the barriers to sport that urban Aboriginal youth face.

This study found that Aboriginal youth engage in traditional physical activities, such as dancing, drumming, fishing, and hunting. I did not inquire about which contemporary activities may be seen by participants as cultural. Future research should look at specific sports as cultural activity for Aboriginal youth in Saskatchewan. A study conducted at the University of Victoria (Riecken et al., 2006) found that basketball and soccer were seen as cultural activities by some Aboriginal youth in B.C. Future research exploring enculturation and its effect on health should determine what activities Aboriginal youth consider as cultural.

Lastly, future research with Aboriginal peoples should become more action oriented. Action research has many different definitions, and these definitions can differentiate between disciplines; however, two common characteristics of almost all action research are that it evokes change and it is research done with participants (Altrichter, Kemmis, McTaggart, & Suber-Skerritt, 2002). Action research within Aboriginal health research can be used as a way to change patterned thinking of individuals and society (Hunter et al., 2006). In the past, research often investigated only ill health in Aboriginal peoples. This research has shaped the way many communities view Aboriginal peoples, and particularly urban Aboriginal youth (UAPS, 2010). In this study, I have worked with Aboriginal youth to highlight many health enhancing beliefs and behaviors that are influenced by Aboriginal culture. My study has also confirmed that a city can be a place of cultural vitality for Aboriginal youth (UAPS, 2010). Future research should continue to focus on what makes urban Aboriginal youth healthy, and not focus solely on negative health behaviors.

5.1.3 Personal Impact

I felt out of place the first time I entered Oskayak two years ago. I realized in those first days at Oskayak, when I knew no one, that relationships and community were important when working with Aboriginal peoples. Within a week of volunteering I began to feel comfortable at the school. One of my favorite things to do during my time at Oskayak was sit in the foyer and chat with students and teachers. At the time I was just happy to know that I was making friends and felt comfortable at a place where I was spending my days. In retrospect, I realize that my time spend hanging out in foyer, talking about what we were doing on the weekend, solidified my relationships and brought me closer to being part of the community of Oksayak.

I regularly visited Oskayak after I had finished data collection to visit the friends I had made during this project. I continued to coach *Team Spirit* basketball this spring and was pleased to see many of the students I had got to know during the study were participating. However, there was about a month where I did not visit Oskayak due to my busy schedule. During that time, I was coaching *Team Spirit* in the evenings, as well as writing my thesis and teaching during the days. After this absence from Oskayak, I visited the school one last time before summer. As I walked into the grade nine class that I had spent a lot of time with in the last year I heard two girls squeal "Serene!" and get out of their desk to greet me. I knew that these girls were very fond of me, as I was of them too, and it was wonderful to see that I was missed. I then sat with the students and asked if they had any last questions about my research before school was out for summer. One quiet young man put up his hand and asked "Where have you been the last month?"

Sometimes it is the simplest question that causes complex emotions to arise. Knowing that a student, whom I assumed did not care if I was there or not all year, possibly missed my

presence made me feel happy, yet at the same time I could not help but feel somber. The journey was over, and I knew I may not see some of these students again. Nobody told me when I started graduate school that research can leave you vulnerable to these sorts of emotions.

Another lesson I have learned from working with the participants in this study is that youth can place immense value on culture. Although I have worked with Aboriginal youth for four years previously, the young men and women in this study challenged my thoughts on the beliefs and behaviors of Aboriginal youth regarding culture. In the past when I worked with Aboriginal youth, it was normally only the youth whose families were leaders in their Aboriginal communities that highly valued culture and were engaged in traditional activity. In this study many participants with different backgrounds valued their culture. Their unwavering belief that culture is a key component in health was inspiring.

This project resulted in the discovery of many positive, health enhancing beliefs and behaviors. Because of these findings, and the process of actively seeking out these positive beliefs and behaviors, I have learned to focus on the positive. This project has made me more aware of the many positive things happening in the community, and in my own life. In the future, when I reflect on this project I will be reminded of the importance of seeking the positive. I believe that looking for the positive in life is not something that comes easily to many people; a conscious effort needs to be made to do so. Furthermore, I feel that it is important that when you do challenge yourself to see the positive you share that observation with those around you.

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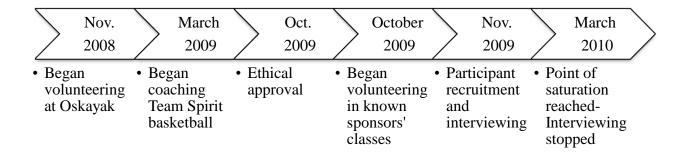
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APPENDICES

Appendix A

Serene Smyth Thesis Procedures Timeline



Ethical Approval

INSTITUTION(S) W	FIGATOR		DEPARTMENT Kinesiology	BEH# 09-194
University of Saskato		RCH WILL BE CO	ONDUCTED	
STUDENT RESEAR Serene Smyth	CHERS			
SPONSOR CANADIAN INSTIT	TUTES OF HEA	ALTH RESEARCH	I (CIHR)	
FITLE Understanding the Cu	ıltural Factors t	hat Affect Body W	eight in Urban Aboriginal Adolesce	nts
ORIGINAL REVIEW 28-Aug-2009		PROVAL ON Oct-2009	APPROVAL OF: Ethics Application Consent Protocol	EXPIRY DATE 07-Oct-2010
Full Board Meeting		D	ate of Full Board Meeting:	
Delegated Review	\boxtimes			
Research Ethics Boar DNGOING REVIEW RE In order to receive an within one month of	d consideration QUIREMENTS nual renewal, a the current expi	status report must ry date each year th	our consent and recruitment procedunplementation. be submitted to the REB Chair for Bestudy remains open, and upon stutp://www.usask.ca/research/ethics_	dy completion. Please
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Appendix C

Student Interest and Contact Information

Are you interested in participating in the research project described to you? □ Yes □ No
If you chose 'Yes' please put your contact information below. If you chose "No" you do not need to fill the rest of the form out.
Name:
Phone number: (home)(cell)
Do you live with a parent or guardian? □ Yes □ No
If you chose 'No' please specify who you live with, or if you live on your own.
How old are you?
Would you like to do one on one interviews or focus group interviews for this project? One on one interviews will be between you and the researcher (Serene) only. Focus group interviews will be with 5-7 other students at the same time. Both types of interviews will have the same questions.
☐ One on One ☐ Focus group

Appendix D

Assent and Consent Forms

ASSENT LETTER (Youth Participants)

Understanding the cultural factors that affect body weight in urban Aboriginal youth

You are invited to participate in a study that is being carried out by researchers from the University of Saskatchewan. Your participation in this study is in no way connected with regular school work at your school and participation in this study is completely optional and voluntary. The purpose of this study is to understand the factors that affect body weight in urban Aboriginal youth. I hope that the findings from this study will help to successfully promote healthy body weight.

If you choose to participate in this study, you will be asked to take part in a tape recorded one on one or group interviews. There will be 3 interviews and one session to go over the interviews. The interviews will take place at your school and will take about one hour. You may request at any time that you would like the tape recorder turned off. If this request is made the tape recorder will be turned off immediately.

Participation is completely voluntary and you can withdraw for any reason, at any time, without penalty of any sort. If you do decide to withdraw from the study any information that you have provided will be destroyed. Feedback will be given to you throughout the duration of the study. You will be encouraged to ask questions during the interviews session if you do not understand something you are asked.

Any information you give to our research team will be kept private and not shared with other students or teachers. After the interview, you will be given the opportunity to review the transcript of your interview, and to add, alter, or delete information from the transcripts as you see fit. In addition, no one from your school will be present during the interviews. Nor will anyone from your school have access to the audio recording of the interviews.

If you chose to participate in the focus group interview there will be other students present. Sometimes people feel more comfortable in discussions when other students are present. However, since other students are present they will hear what you say. The researcher will attempt to safeguard the confidentiality of the discussion, but cannot guarantee that other members of the group will do so. Please respect the confidentiality of the other members of the group by not disclosing the contents of this discussion outside the group, and be aware that others may not respect your confidentiality. Please remember that participation in the focus groups is optional and that the one-on-one interviews may be a more comfortable and private alternative.

All of the information provided through the interviews will be confidential and stored by Dr. Louise Humbert in a locked office on the University Campus for a minimum of five years after the completion of the study. If you begin the study and then decide you do not want to continue, you may withdraw at any time, for any reason, without penalty or without causing anyone to be upset.

Before the interview begins you will be told that you do not have to answer the questions if you do not want to. In addition, after the interview is finished, you will be provided with the name and contact information of a school councilor you can talk to, if you experience negative emotional experiences and feel you may need guidance. If you or your parent or guardian has any questions or concerns about this study, please do not hesitate to contact Serene Smyth (966-1123) or Dr. Louise Humbert (966-1070) at any time.

After you have read this letter, please read over the attached consent form included in this package. If your guardians and you decide that you would like to be a participant in this study, then you must complete the participant consent form and your parent(s)/guardian(s) must also complete their consent form. Signing the consent forms will signify your understanding of your rights as a participant and will give your consent to participate in this study. Lastly, as a participant in this study, you will be informed of any new information that may affect your decision to participate.

Once you have handed your assent and consent forms back to the researcher (Serene) or to the office Serene will contact you by phone or she will find you at school to set up times for the interviews.

Student Assent

I	voluntarily consent to participate in the
study: Understanding the cultural factors th	nat affect body weight in urban Aboriginal youth.
I understand the purpose of the study and r	ny involvement, and that I have the option to
withdraw from the study at any time witho	ut penalty of any sort. I also agree that if I withdraw
from the study at any time, any data that I	have provided will be destroyed. My information will
be used for research purposes only, and an	y details that may reveal who I am will not be
included in study reports and presentations	s. If my caregiver or I have any questions, I may call
the Ethics Office (966-2084) at the University	sity of Saskatchewan. A copy of this consent form has
been given to me for my records.	
Participants Signature:	Date:
If you have any questions or concerns about	ut this study, please do not hesitate to contact Serene
Smyth or Dr. Louise Humbert at any time	at the address below.
Researchers Signature:	Date:
The University of Saskatchewan Advisory	Committee on Ethics in Behavioural Sciences
Research approved this research project in	Oct.23, 2007.

Ms. Serene Smyth Student Researcher College of Kinesiology University of Saskatchewan Saskatoon, Saskatchewan S7N 5B2

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Phone: 966-1123

Email: serene.smyth@usask.ca

Dr. Louise Humbert Principal Investigator College of Kinesiology University of Saskatchewan Saskatoon, Saskatchewan

S7N 5B2

Phone: 966-1070

Email: louise.humbert@usask.ca

CONSENT LETTER (Parents/Guardians)

Title of the study: Understanding the cultural factors that affect body weight in urban Aboriginal youth.

We would like to ask for your son or daughter's assistance with a study that is being carried out by the College of Kinesiology at the University of Saskatchewan. The results of this study will help us to determine how to better promote healthy body weight in urban Aboriginal youth. If your son/daughter decides to volunteer, his/her role will be to complete a background questionnaire and 3 interviews as well as be observed. Your son/daughter will have a choice to participate in focus group interviews or one on one interview. The focus groups will have 5-7 other students being interviewed with your son/daughter at the same time; somewhat like a discussion group. One on one interviews will be between just your son/daughter and the researcher. The interviews will take place at your son/daughter's school. The focus group and one on one interviews will be recorded with the use of a tape recorder. Your son or daughter may request at any time that they would like the tape recorder turned off. If this request is made the tape recorder will be turned off immediately.

This study will also use participant observation. Observation will take place around the school and possibly out of school during lunch and after school. The following list is what possible observations and inquiry topics will be given attention when observing students.

- Description of the physical environment or setting
- Description of the social environment
- Description of the structured or planned interactions
- Observing informal interactions and unplanned activities
- Observing non verbal communication
- Commenting on what does not happen (nonoccurrence)
- Observing health behaviors such as food choice and physical activity level.

Participation is entirely voluntary. There will be no reward for participating and no negative consequences for non-participation. Your son/daughter can withdraw from the study for any reason, at any time, without penalty of any sort (his/her grade). If your son/daughter does decide to withdraw from the study, any information that they have provided will be destroyed. The results of the study will be completely anonymous as no names or means of identification will be used in any printed or published reports. If your son/daughter's words are used in the final report, confidentiality will be assured through the use of a pseudonym (false name). A master list of participant's names and their assigned pseudonyms will be stored separately from the audiotapes and transcripts. In addition, no one from your son/daughter's school will have access to the audio recording of the interview following its completion.

The data collected will be kept as anonymous and confidential as possible. However, group interview will be used in this study, so there are limits to which confidentiality of information can be ensured. For example, we cannot guarantee that other participants in our group will not share information discussed in the group with others. The researcher will attempt to safeguard the confidentiality of the discussion, but cannot guarantee that other members of the group will

do so. If your son or daughter chooses to participate in the focus group please ask her or him to respect the confidentiality of the other members of the group by not disclosing the contents of this discussion outside the group, and be aware that others may not respect your confidentiality. This will be reiterated to them at the beginning of the focus group meetings. Please remember that participation in the focus groups is optional and that the one-on-one interviews may be a more comfortable and private alternative for your son or daughter.

After each interview is finished, your son or daughter will be provided with the name and contact information of a school councilor they can talk to, if you experience negative emotional experiences and feel they may need guidance.

All the information provided will be confidential and stored by Dr. Louise Humbert in a locked office on the University Campus for a minimum of five years after the completion of the study.

If you and your son/daughter decides that he/she would like to be a part of this study, please complete the attached form. If you or your son/daughter has any questions or concerns about this study, please do not hesitate to contact Dr. Louise Humbert (306-966-1070) at any time.

Once your son or daughter have handed their assent and consent forms back to the researcher (Serene) or to the office Serene will contact them by phone or she will find you them at school to set up times for the interviews.

Parents/ Guardians Consent

I have read and understand the purpose of this study and my son's/daughter's involvement in this study. I am aware that my son/daughter will remain anonymous throughout the study and in any written results of the data collection through participation in this project. I am aware that my son/daughter has the right to refrain from answering any questions that they feel uncomfortable answering and that they have the right withdraw from the study at any time. I acknowledge that I have received a copy of the consent letter for my records. If I have any questions or concerns I can contact Dr. Louise Humbert (306-966-1070) in the College of Kinesiology at the University of Saskatchewan. If I wish to clarify the rights of my son/daughter as a research participant, I may call the Ethics Office (306-966-2084) at the University of Saskatchewan.

give permission to allow				
to participate in the study conducted by the College	ge of Kinesiology.			
Parent/Guardian's Signature	Date			
Researcher's Signature	Date			

The University of Saskatchewan Advisory Committee on Ethics in Behavioural Sciences Research approved this research project on October 23rd 2009.

Ms. Serene Smyth Student Researcher College of Kinesiology University of Saskatchewan Saskatoon, Saskatchewan S7N 5B2

Phone: 966-1123

Email: serene.smyth@usask.ca

Dr. Louise Humbert Principal Investigator College of Kinesiology University of Saskatchewan Saskatoon, Saskatchewan S7N 5B2

Phone: 966-1070

Email: louise.humbert@usask.ca

Appendix E

Interview Guide

Before each interview provide a brief explanation of the purpose for the interview – to explore their knowledge, attitudes and beliefs, about healthy body weights, healthy eating and physical activity.

Explain that the purpose for tape recording is to help me be as accurate as I can with the words that they say and that if I were to write things down I might miss something. Stress how important their words are to me and that no one would be able to listen to the tape except for the person interviewing and the person who will do the transcribing. I will write everything out and go over it with them in person and if they choose at that time, they can keep the tape.

To begin, I'd like to know a little bit about you:

How old are you?

How long have you lived in Saskatoon?

Have you lived anywhere else?

Who currently lives with you?

How far do you live from Oskayak High School?

How long have you attended Oskayak High School?

Have you attended any other high schools?

What do you enjoy about Oskayak?

What do you find challenging about Oskayak?

Culture:

- 1. What do you think culture is?
- 2. Who helps you in understanding your culture?

Probe: School, Elders, Grandparents, Parents, Friends, Community?

3. How important are traditional cultural events in your life?

Probe with examples such as powwows, sweat lodges, pipe ceremonies and community feasts.

4. Do you speak your or any First Nations language?

Extension: Is it important to learn First Nations languages?

5. What do you think health is?

Extension: What is a healthy body/mind?

- 6. How would you define good health?
- 7. Would you say you have good health? Can you tell me why you feel this way?
- 8. What do you think makes people healthy? What about things that make people unhealthy?
- 9. What do you think are health issues in your school or community?

Healthy Body Weights:

- 1 What do you think healthy body weight means?
- 2 What does a healthy body look like to you?
- 3 In your culture are some body types (weights) more accepted than others? If so, what?

Extension: Are people encouraged to be heavier (lighter)?

4What do you feel causes some people to have unhealthier bodies than others?

5Do you see unhealthy bodies (or body weights) as a being a problem in your community? 6Do you think you have a healthy body weight?

7What factors in your school, family and community affect your ability to have a healthy body weight?

8Is there anything else that you would like to tell me that we haven't talked about already?

Physical Activity:

1What do you think is meant by the term physical activity?

2When talking about 'physical activity' (the range of activities that moves your body), what would a physically active person be doing? What would an inactive person be doing?

3Do you consider yourself to be physically active? Can you give me a description of what you do? Does anyone do these activities with you?

a.Do these activities change with the seasons? (Are they different in the summer compared to the winter)?

4 Remember when we talked about culture in the last interview? (Re-cap what they said and what I said about culture and what it is). Do you think that physical activity and culture have anything to do with one another? Why or why not?

5Do you think people in different cultures like different physical activities?

6Do you think that different cultures value or like physical activity more than other cultures? Why? What particular cultures?

7 Think about your school. Is there anything about your school that makes it easy or hard for you to be active?

8 Think about your family. Is there anything that your family does that makes it easy or hard for you to be physically active?

aTalk a bit more about family supports/barriers

bTalk a bit more about levels of support (parents, children, sisters/brother, aunties/uncles, cousins)

9 Think about where you live. Is there anything about your community that makes it easy or hard for you to be active?

10 What do you think are some things that would make young people in the community want to do physical activities?

11 Are there things in the community that could help, i.e. being outdoors/indoors, groups/individual, women only, older and younger together/separate

12 What do you think are some things that would make you want to do more physical activity?

13 Is there anything else that you would like to tell me that we haven't talked about already?

Healthy Eating:

1 What would you describe as 'healthy eating'?

a What would be some foods you would eat on a 'healthy food day' or a 'good for you day'?

b Is it difficult for you to get some of these foods? Why? (money, availability?)

2 What would you describe as 'healthy foods' in your culture?

a What would be the healthiest/unhealthiest?

b When would you eat these foods?

c Where do you get these foods?

d How would you prepare these foods?

e Who is there when you prepare them? What language is spoken

3Are there any other foods that you believe to be 'healthy foods'?

a Any foods that you do not eat now but would like to? What prevents you from eating these foods?

4 How often do you eat traditional foods such as moose, caribou, deer, bear, fish, goose, duck, rabbit, berries, wild vegetation and bannock?

5 Do you think that traditional foods are healthy? Would you like to eat more traditional foods? Why? What is stopping your from eating more traditional foods?

6 I've heard that sometimes household expenses, such as rent, heat, or child care prevent families' from buying foods they prefer to eat.

aHas your family experienced this?

bCan you tell me more about this experience?

cWhat was it like?

dHow did this impact on your family's diet?

7 We've heard that sometimes household expenses, such as rent, heat, or child care prevent families' from buying food.

aHas your family experienced this?

bCan you tell me more about this experience?

cWhat was it like?

dHow did this impact on your family's diet?

8 Think about your school. Is there anything about your school that makes it easy or hard for you to eat healthy food/beverages? Availability? Cost?

9 Think about the people you live with. Is there anything them that makes it easy or hard for you to eat/drink healthy foods/beverages?

10 Talk a bit more about supports/barriers

11 Talk a bit more about levels of support (parents, children, sisters/brother, aunties/uncles, cousins)

12 Think about where you live. Is there anything about where you live that makes it easy or hard for you to eat/drink healthy foods/beverages?

13 What do you feel are some things that would make people (of all ages) in your community want to do physical activities?

14 Are there things in the community that could help, i.e. being outdoors/indoors, groups/individual, older and younger together/separate?

15 What do you think are things that would encourage you and your friends to choose to eat the healthier foods?

16 Is there anything else that you would like to tell me that we haven't talked about already?