Promising Practices in Indigenous Mental Health

Canadian Academy of Health Sciences
Académie canadienne des sciences de la santé

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PANEL 2A:

HEALTH SOLUTIONS FOR THE FUTURE: PROMISING PRACTICES

Cultural Safety

- Understand the historical and contemporary social, economic and political contexts that create health disparities, social inequities, and structural violence

- Build relationships with others based on recognition, respect, and inclusiveness

- Establish a safe situation for dialogue by sharing power and control

- Recognize diverse knowledges and ways of knowing

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Unique Situation of Aboriginal Communities

- diversity of Aboriginal cultures and communities

- link between mental health and historical trauma

- high prevalence of specific problems (e.g. suicide, substance use)

- importance of cultural identity, values and traditions

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Historical & Contemporary Determinants of Mental Health

- Colonization, cultural suppression, forced assimilation
  - Sedentarization, forced relocation
  - Residential school system, systematic out-adoption
- Economic marginalization, poverty and 'relative misery'
- Crowded housing, food and water insecurity
- Exposure to violence, disrupted parenting
- Political disempowerment, bureaucratic/technocratic control
- Racism and discrimination
- Lack of recognition of Indigenous identity and human rights
- Environmental degradation and climate change

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transcultural psychiatry

Article

The intergenerational effects of Indian Residential Schools: Implications for the concept of historical trauma
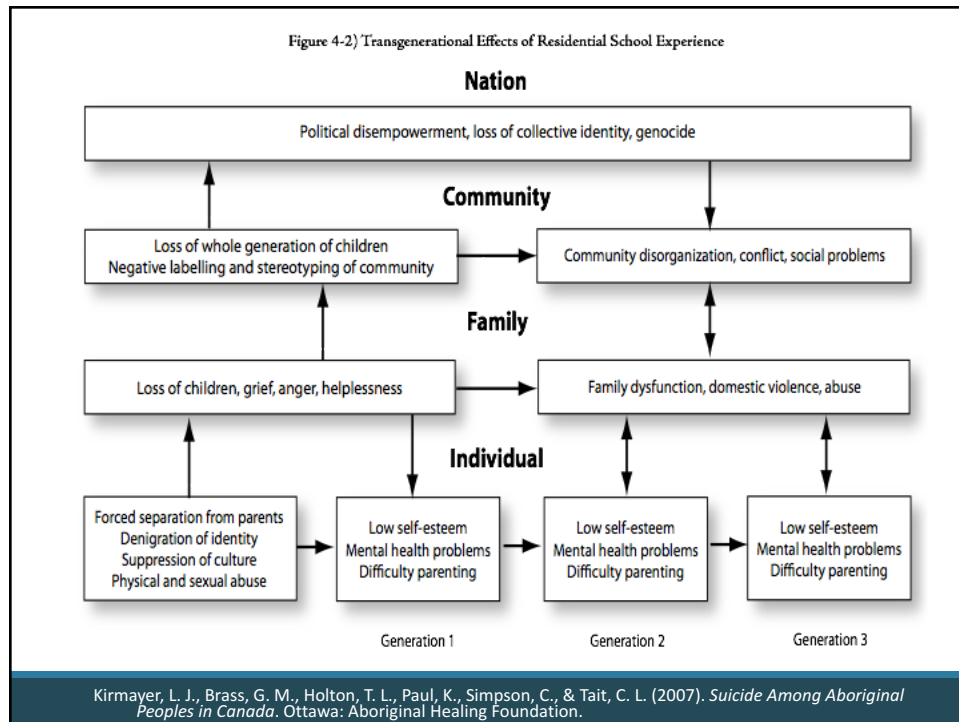
Amy Bombay
University of Ottawa

Kimberly Matheson
Carleton University

Hymie Anisman
Carleton University

Abstract
The current paper reviews research that has explored the intergenerational effects of the Indian Residential School (IRS) system in Canada, in which Aboriginal children were forced to live at schools where various forms of neglect and abuse were common.

Figure 4-2) Transgenerational Effects of Residential School Experience

Kirmayer, L. J., Brass, G. M., Holton, T. L., Paul, K., Simpson, C., & Tait, C. L. (2007). *Suicide Among Aboriginal Peoples in Canada*. Ottawa: Aboriginal Healing Foundation.

Distinctive Features of Indigenous Suicide

- rates much higher than the general population & in some regions, have increased in recent years
- rates vary widely across communities
- young males most affected by death by suicide
- prevalence in young women increasing
- suicides often occur in clusters
- rates of depression, alcohol and substance use, and trauma exposure are high but proportion of suicides attributable to these problems and to social disadvantage is unknown

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BC First Nations Suicide Rates by Number of Cultural Continuity Factors

Rate/100,000

- self-government
- land claims
- education
- health services
- cultural facilities
- police and fire services

Chandler, M. J., & Lalonde, C. (1998). Cultural continuity as a hedge against suicide in Canada's First Nations. *Transcultural Psychiatry, 35*(2), 191-219.
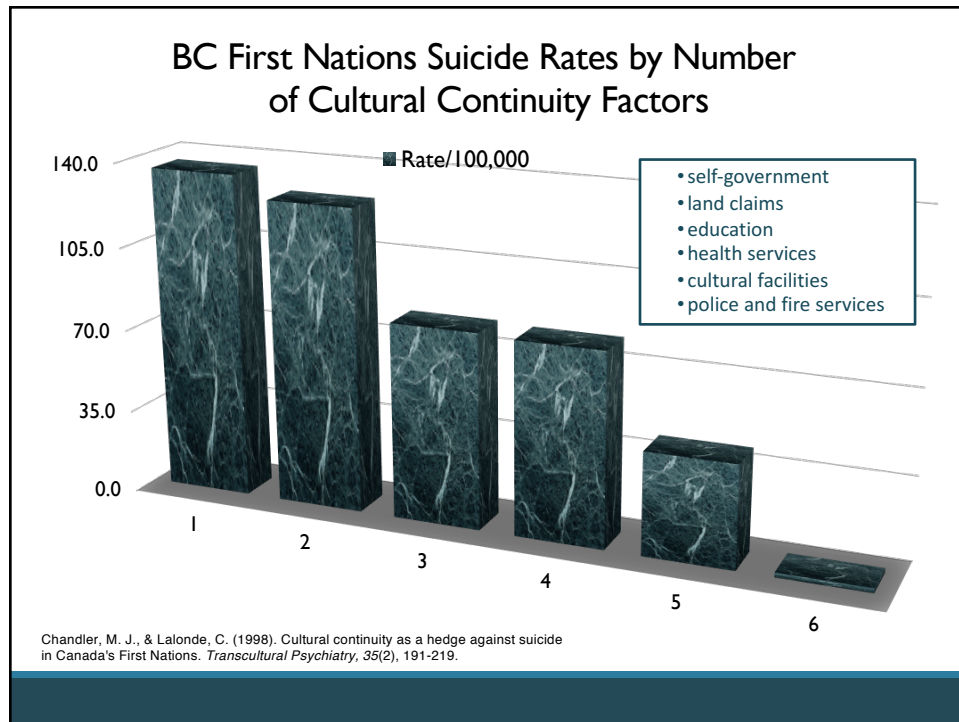
Alternative Interpretations

Local control
- sense of empowerment, collective self-efficacy & self-esteem

Better infrastructure
- more activities for youth

High level of community organization
- order, solidarity & support, power sharing

Larger community
- buffering effect

More economically successful
- more opportunities for youth

Adaptation rather than pure traditionalism

Indigenous Strategies of Resilience

- Connection to land and sense of place as ways of constituting and regulating the ecocentric self

- Recuperation of tradition, language, spirituality, healing as personal and collective resources

- Stories and storytelling as privileged way of knowing and transmitting collective identity

- Political activism as source of collective and individual agency

ROOTS OF RESILIENCE
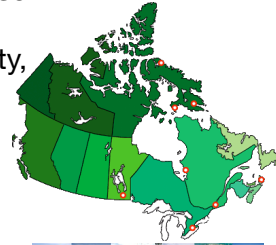
www.mcgill.ca/resilience

Kirmayer, L. J., Dandeneau, S., Marshall, E., Phillips, M. K., & Williamson, K. J. (2011). Rethinking resilience from indigenous perspectives. *Can J Psychiatry, 56*(2), 84-91.

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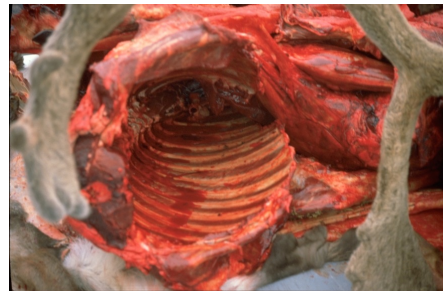
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Gaps in Knowledge

- very little psychiatric epidemiology
- limited data from RCTs in general populatin available on suicide prevention, mental health promotion
  ◦ school-based programs (SOS, GBG, Sources of Strength)
    ◦ improvement in knowledge and attitudes
    ◦ reduction in risk factors; no evidence for reduction in suicide
  ◦ for youth who have made an attempt
    ◦ follow-up from emergency/hospital
    ◦ treatment of depression; dialectical behaviour therapy
- no RCT or CCS evidence for First Nations, Inuit, Métis
- limited data on culturally-based interventions

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Promising Practices in Suicide Prevention and Mental Health Promotion

- provide mental health services: crisis, therapy, postvention
- promote community empowerment and address inequities
- support positive parenting and family life
- strengthen cultural identity, language, belonging
- create youth educational, recreational, vocational opportunities
- address marginalization, racism, discrimination, structural violence in wider society

Listening to One Another
to Grow Strong

Mental Health Promotion for
Aboriginal Youth

Cultural Based, Family Centred Mental Health Promotion
for Indigenous Youth
www.mcgill.ca/mhp

How does the intervention work?

- engaging community in action on mental health
- valuing Indigenous culture, history and community
- strengthening cultural identity
- helping youth learn coping strategies and social skills
- improving family communication and parenting skills
- connecting across the generations to Elders
- increasing sense of belonging within community

Kirmayer, L.J., Sheiner, E. & Geoffroy, D. (2016) Mental health promotion for Indigenous youth. In: M. Hodes & S. Gau (Eds.) *Positive Mental Health for Children and Adolescents: Fighting Stigma, Promoting Resiliency and Positive Mental Health* (pp. 111-140). Elsevier.

Key Questions & Challenges

- How can we strengthen the evidence base on mental health needs and solutions?

- What role do specific cultural knowledge, values and practice play in resilience, well-being and recovery?

- How can adequate mental health services be provided to culturally and geographical diverse communities?

- How can mental health promotion and illness prevention by advanced through collaboration at community, health systems, and larger social networks?

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