Widening the Circle

National Network for Aboriginal Mental Health Research

January 2006 Volume 8, Issue 1

"Aboriginal Identity, Community and Resilience" - NAMHR 2005 Annual Meeting

The NAMHR 2005 Annual Meeting titled "Aboriginal Identity, Community and Resilience" was held on November 7 & 8 in Vancouver, BC. The meeting was hosted by Dr. Michael Chandler and his team at the University of British Columbia and held at the Sty-Wet-Tan, UBC First Nations House of Learning. The two-day meeting consisted of presentations by NAMHR co-investigators, special guests & collaborators, afternoon workshops on current and future research projects and poster presentations by graduate students affiliated with the Network.

Larry Grant, Musqueam Elder, opened the meeting by welcoming the participants to the territory of the Musqueam people. This was followed by opening addresses by Dr. Richard Vedan, Director of UBC First Nations House of Learning, Dr. Eduardo Jovel, Director of UBC Institute for Aboriginal Health, and Dr. Linc Kesler, Director of UBC First Nations Studies Program. The opening session of the meeting also included introductions by Dr. Laurence Kirmayer, McGill University and NAMHR Co-Director, Dr. Gail Valaskakis, NAMHR Co-Director and AHF Director of Research, and Mr. Mike Degangé, AHF Executive Director and NAMHR Advisory Board Member.

The morning of Day 1 began with presentations by Michael Chandler, Chris Lalonde and Roger John of the University of Victoria, and concluded with Madeline Dion Stout, former faculty member of Carleton University. The presentations were followed by a panel discussion on "Community Partnerships in Aboriginal Mental Health Research", where issues concerning the building and maintaining of community partnerships were discussed. (These are elaborated more fully on pages 2-4).

The afternoon session began with a workshop on a new bi-national research project between Canada and New Zealand, "ICIHRP Resilience Research – Roots of Resilience", chaired by Dr. Kirmayer, and included a discussion that the project was initially envisioned to be tri-national but regrettably, the research team in Australia, were unable to secure funding for their participation. This was followed by a workshop on the "Models & Metaphors" research project chaired by James Waldram. Participants were then invited to join in on one of two concurrent strategy sessions, "Urban Aboriginal Mental Health Research: Recent Findings and Current Directions" chaired by Kathryn Gill, and "Suicide Prevention Research Team" chaired by Dr. Gustavo Turecki. The day 1 concluded with poster presentations by graduate students and NAMHR co-investigators.

The morning session of Day 2 consisted of four presentations; *"Feeling Like you Don't Belong: Identity, Culture, and Mental Health in Native North America*" by Joseph Gone of the University of Michigan; *"Why Anthropology Slept: The Engineering of Aboriginal Social Suffering"*, by Adrian Tanner retired faculty member of Memorial University; *"The Social and Psychological Impacts of Gambling in Cree Communities in Northern Quebec"* by Kathryn Gill of McGill University, and *"Through the Pain: Post Colonial Suicide Prevention in Practice"* by Darien Thira. (These presentations are elaborated more fully on pages 4-7).

The afternoon session began with a second workshop on the new bi-national research project "ICIHRP Resilience Research – Roots of Resilience", chaired by Dr. Kirmayer (see page 9). This workshop was followed by a panel discussion where panel members discussed their research projects in detail. The panel included Jake Burack, Michael Chandler, Rod McCormick, Chris Lalonde, Caroline Tait, Cornelia Weiman, Phyllis Zelkowitz, Pamela Bennett, and Jane McKendrick, with panel members fielding questions from participants in the audience concerning various aspects of their projects.

The two-day meeting concluded with a closing by Dr. Richard Vedan and Dr. Eduardo Jovel, and also on behalf of Musqueam Elder, Larry Grant.

This issue is dedicated to the NAMHR annual meeting and will discuss in more detail the presentations, projects, workshops and discussions. ✻

IN THIS ISSUE

Changing Selves in Changing Worlds Le,nonet Project	**2**
Community Partnerships	**3**
Feeling like You Don't Belong	**4**
Why Anthropology Slept	**5**
Gambling	**6**
Through the Pain	**7**
Poster Presentations	**8**
Roots of Resilience New Coordinator	**9**
Contributors	**10**

Changing Selves in Changing Worlds: Forming identities on the fault-lines of colliding cultures by Michael Chandler (Abstract from Annual Meeting 2005 Program)

The program of cross-cultural research to be described explores the course of identity development in Aboriginal and non-Aboriginal youth by focusing attention on the different developmental routes by means of which adolescent members of these distinctive cultures differently come to some workable understanding of their own personal persistence, or "self-continuity" in time. The broad claim to be advanced is that, on threat of otherwise ceasing to be anything that could be recognized as a self, all of us must satisfy at least two constitutive conditions. The first of these is that, because we are all works in progress, change is identity's only constant. The second is that, on the threat of otherwise failing to qualify as an instance of what selves are ordinarily taken to be (Cassire, 1923), each of us must be satisfactorily understood to somehow remain relentlessly the same. In the absence of any such temporal horizon, all notions of moral responsibility, and all ideas of commitment to an as yet unrealized future would become nonsensical. As such, persistence is not an elective "feature" of selves, but a "constitutive condition" of their coming into being (Habermas, 1991). What ties the notion of personal persistence to the problem of youth suicide is that without some means of counting oneself as continuous in time there would be no reason to show appropriate care and concern for one's own future well-being. The research to be reported explores this proposed relation between individual and collective efforts to achieve a workable sense of personal and cultural persistence, on the one hand, and suicidal behaviors in both culturally mainstream and Aboriginal youth, on the other. The strong conclusion supported by the evidence to be presented is that the frequency with which the young First Nations people end up killing themselves is a direct function of their own and their community's success in securing a sense of cultural continuity in time. ✻

LE,NONET: A Project to Support the Success of Aboriginal Students - Summary of Presentation by Chris Lalonde and Roger John, University of Victoria

By Robin Yates

Dr. Chris Lalonde and Roger John of the University of Victoria presented information regarding the newly initiated Le,nonet Project, a four-year project implemented in September 2005 that focuses on the success of Aboriginal students in post-secondary education. The project was initiated through discussions between representatives of the University of Victoria and the Canadian Millennium Scholarship Foundation and is based on the below-average graduation and participation rates of Aboriginal students in post-secondary education. Some statistics are as follows:

- 3% of First Nations people held a university degree compared to 14% of Canadians
- 21% of First Nations people and Inuit people held a post-secondary certification or diploma
- 1.3% of Inuit hold a university degree
- Métis peoples have similar rates of post-secondary completion

This lack of success is not surprising given lower rates of completion of secondary school for Aboriginal students. The Statistics Canada 1996 national census data showed 63% of Aboriginal children completed secondary school compared to 79% for Canadians. In one Victoria School District, rates of completion are 34% for Aboriginal students as compared to 79% for non-Aboriginal students.

Accordingly, the Le,nonet Project developed a fourfold purpose. The primary objective is to enhance the success of Aboriginal students at the University of Victoria. Other goals are to build on the strengths of existing programs and initiatives at UVic and to engage the University and the community in the primary goal. Additionally, the Le,nonet Project will provide new and effective forms of support for all Aboriginal students.

The Le,nonet Project is jointly supported by the Canadian Millennium Scholarship Foundation and the University of Victoria. UVic President, David Turpin, has made a financial and administrative commitment to further the success of Aboriginal people at the University of Victoria and implement a Strategic Plan *"to increase the number of aboriginal students graduating from UVic, building on our commitment to and our unique relationship with First Nations communities"*. In addition, the Millennium Foundation and the University of Victoria have committed to the following initiatives and programs to the Le,nonet Project:

- Four years of funding in the amount of four million dollars
- Bursaries in the amount of $1-5,000 provided to 100 students per year
- Peer Mentoring Program: 10 students trained per year to mentor new students (50-100 per year)
- LE,NONET Seminar: (25 students per year)
- Research Apprenticeships at UVic
- Community Internships with participating communities
- Faculty/Staff Training Programs (incorporated into UVic Human Resources "core competencies")

The Le,nonet Project originated through a pilot project supported by the Canadian Millennium Scholarship conducted during the summer of 2004. Working groups initiated community consultations both within and outside of

Continued on page 3

LE,NONET: A Project to Support the Success of Aboriginal Students (continued)

the University campus and, through interviews with community members, students, faculty, and administration, it was determined that the keys to success involved the following aspects:

- Financial support for students
- Support for Indigenous knowledge
- Peer mentoring
- Research Apprenticeships
- Community Internships
- Faculty/Staff training & support
- Service integration & enhancement

The plan for realization of the keys to success are enacted through five aspects of the Program: student mentoring, community internships, research apprenticeships, staff development and service integration, and data collection and analysis. The effectiveness of the program will be rated through examination of retention and completion rates for Aboriginal students prior to the introduction of the project as well as through how rates vary (i.e., by gender, department, age, etc.). Comparisons will be made with Aboriginal students who do not participate in the Project as well. Identifying Aboriginal students can be difficult and records will be obtained through the University of Victoria (for self identified students) and from PIN records from BC Ministry of Education records. Long-term data on the Le,nonet Project retention rates will supply information to determine if the Project improves overall retention rates for Aboriginal students and how those rates differ by various factors. As well, the success of the various components of the Project will be compared individually and to their cumulative effects (e.g., bursary program only *versus* bursary program and mentor program).

The Le,nonet Project intends to show that participation does increase retention and the greater the participation in the program, the more successful Aboriginal students will be in post-secondary education. Measuring success of the program will involve a variety of variables including retention and graduation rates, grade point averages of students, employment rates post graduation, and how many students go on to graduate studies. In addition, the satisfaction of the students themselves will be measured. Most importantly, success will be defined through Aboriginal students and community members.

For more information, please visit the Le,nonet website: www.uvic.ca/lenonet

*

Community Partnerships in Aboriginal Mental Health Research Discussion

By Aaron Denham

Ms. Dion Stout discussed the characteristics of a continuum describing the balance between social constructions by the dominate society, and the cultural truths of Aboriginal people. She emphasized that there is a middle point on this continuum where the bottom can open and people fall through. This opening is characterized by high tension, stress, and suicide. Although tension and stress disrupt Aboriginal communities and individuals, she comments, from a resilient perspective, that some communities found that the tension and stress brought the community closer together.

Ms. Dion Stout emphasizes that we must open our minds and think in a transdisciplinary sense that appreciates seeing through the eyes of Aboriginal people and a higher order. She remarked that it is helpful for service providers and researchers to consider "unconventional" approaches to helping Aboriginal people. For instance, in an effort to get a client into the system, a counselor gave her client cigarettes each time she came to an appointment. The immediate need of getting this individual help outweighed the issue of providing her with cigarettes. Returning to the continuum mentioned at the beginning of her talk, Ms. Dion Stout provided extensive examples of the opposing values dwelling on each side of the "social construction" (side one) to "cultural truth continuum" (side two). Examples include (table below):

This continuum is valuable, as it deepens our understandings by looking at the social constructions with local cultural truths, and considers how we transform these cultural truths.

In her conclusion, Ms. Dion Stout leaves us with a question asking: "How often do we say how beautiful we/you are?" *

Side 1: Social Construction	**Side 2: Cultural Truth**
Colonialism	Poverty, sexism, racism, marginalization. Native people are made poor on all fronts.
Resourcefulness	They did it themselves based on relationships with self and community.
Diversity	Ethnic drifting. An individual with no relations to anything (this is a very unfortunate condition).
Success Indicators	Sensory analysis. That is, how we feel, see, smell, and touch, within the university setting. It is important to take into account how Aboriginal people feel while in the university, as how one feels is an important determinate of success.

Panel Discussion on Presentations by Michael Chandler, Chris Lalonde & Roger John, & Madeline Dion Stout

By Aaron Denham

Selected questions and comments.

Q: Regarding the process of going from a generic self to First Nation communities. Does the notion of the generic self work? Is it a valid starting point?

A: (Dr. Chandler) Are we making the claim of what a universalized core of the self means? The closest we come to any universalized claim is a commitment to the idea that there is no working society that did not determine a way to understand themselves over time. Thus, the important question is: How do people see themselves as projected through time? Commonly, Aboriginal people are narrative dependent and relational, whereas European's are more individual private. It is important to note that these views of the self are historically situated, as certain Aboriginal people do take a European or essentialist view of the self.

Q: Is there something about this approach that forces the preference of the European view?

A: (Dr. Lalonde): We examine their idea of community/cultural continuity. First, we don't cram our model into them; second, particular areas of inquiry include how one maintains cultural contributions; we examine how decisions are made; and, finally, we look for a common view of the future.

Dr. Pam Bennett commented that it is important that research questions come from the community; that one goes to the elders; that we examine the different phases of the lifecycle, as things are done differently at different stages of life; and, she emphasized how important it is to look back at the ancestors to determine the next step.

Finally, John Paul Jones commented that history often looks back at the past to how things used to be, and is thus sterile. He raised the issue of the difficulty of capturing or measuring "intelligence" and the importance of recognizing the need for recognition of disability in research endeavors. ✻

"Feeling like you don't belong: Identity, culture, & mental health in Native North America" – Summary of presentation by Joseph Gone, University of Michigan

By Melissa Tiessen

Loss of cultural identity and pride are widely recognized as consequences of colonization for North American Native groups. To understand how identity can best be revitalized, we first need to recognize what current models of identity have (and do not have) to offer, and consider that a new, more dynamic conceptualization may better serve the goal.

Models of identity can be based on intrinsic (e.g., fullblood) or enacted (e.g., what one does, like drink or not drink) components. Typical models of identity are usually focused on intrinsic factors and come from a dimensional (versus discursive) perspective.

Dimensional models conceptualize identity as being along a continuum, for example, the opposite end points represent an assimilated versus traditional identity. However, this reduces the complex experience of identity into a single point along the continuum. In response, models have been expanded to reflect bi- or tri-culturalism, yet this still results in a reduction of a complex experience.

Discursive models, alternatively, see identity as a creative product arising from the interactions between people, based on history and pre-existing notions. For example, Gone shared some personal examples regarding interviews with family members. In particular, his grandmother commented that "Gros Ventre ways are gone. / Real Gros Ventre people are gone." This comment made Gone reflect on the notion of a "real" identity, and led to his own conceptualization that culture and identity co-constitute one another, i.e., they make each other up. Identity emerges as a product of interactions which construct the context for identity to make sense. (Methodological point: Thus researchers should use more of a narrative analysis approach versus just simply questionnaires, which follow the dimensional/continuum perspective.) Gone's new perspective on identity shifts the emphasis from an intrinsic to an enacted orientation, which gives more room for real-life dynamics and the importance of the social context.

This conceptualization can be demonstrated with Theresa O'Nell's "Empty Centre" model of identity (following from the idea that "real Indians" don't exist anymore). Basically, the model is diagrammed as a series of concentric circles to represent the varying levels of "Indianness". Those outside the circles are Non-Indian, those within the outer circles are termed Contemporary Indians, and those at the inner circle are the "Real" Indians (however defined).

This model, along with Gone's conceptualization, demonstrates a number of key points: 1) Emphasizes the diversity of identity assessments—for e.g., older versus younger community members may place people in different spots within or outside the circles; 2) Accommodates the shifting historical reformulation of Indian identity—for e.g., people may hold different meanings of Indianness over time; and 3) Accommodates the shifting position of identity within people—for e.g., depending on who one is interacting with.

Thus, the model can help to make sense of Gone's grandmother's statement (regarding her perspective that there are no real Gros Ventre anymore), as well as Gone's own perspective that to him, indeed his grandmother embodies everything that is Gros Ventre. ✻

Why Anthropology Slept; the Engineering of Aboriginal Social Suffering - Summary of presentation by Adrian Tanner, Memorial University

By Claire Fantus

According to the Inuit, wisdom is often gained through dreaming. Dreams are not metaphors, but episodes of authenticity. The dreamer does not wish to escape reality, but instead "sets out in search of meanings that will help to make sense of the experiences of waking life"(Ingold 2000: 101). Unfortunately, anthropology slept dreamless.

In his reflexive and insightful lecture at the NAMHR conference, Adrian Tanner spoke about the emergence of social suffering among Aboriginal populations. He identified the movement from camp to settlement after World War II as a pivotal moment in Canadian history, which marked the institutionalization of an ever-present colonial gaze upon Aboriginal communities. The insuperable triple-alliance, composed of the fur traders, missionaries and RCMP officers was an amalgam of forces that abrasively encouraged the Inuit to move into settlements. Their argument was morally compelling: sedentarization would give the Inuit access to resources such as medical care, education and wage labour. The Inuit, however, had little choice: the collapse of the fur trade had caused irreversible ecological disruption, leaving Inuit hunters nutritionally and economically vulnerable.

At this time, ethnographers were alive and well in the North, but failed miserably to unearth the muted narratives of the Inuit experience. Anthropologists touted the positivist 'development' agenda, which although well-intentioned, seethed of ethno-centrism and colonial hegemony. The emic perspective was lost, only to emerge in the 1970s with the critical works of Hugh Brody and Harold Cardinal, among others.

As Tanner highlighted, Aboriginal development projects (with which anthropologists collaborated) were intrinsically problematic: they assumed that hunting was a necessary transition to a more 'modern' and 'advanced' form of subsistence compatible with capitalist ideals. This evolutionist paradigm envisioned development as linear with industrial modernity as its inevitable *telos*. The role of government programs was therefore to facilitate this progression. Any reluctance expressed by Aboriginal communities in the transition process was interpreted as their internal challenge in adjusting to a foreign way of life. This perspective served to essentialize hunting communities, assuming their knowledge of the land was limited to animals, and that they were ignorant in the domain of forestry, mining or trade. However, as Tanner argued, Aboriginal communities have always been engaged in a "mixed flexible economic strategy". Their reluctance to embrace this transition was not due to an incommensurability between their 'traditional' worldview and that of Western modernity; in fact, reluctance stemmed from something much deeper, and perhaps as a response to the destructive realities of racism and police brutality.

Another problematic aspect of development programs was their focus on the notion of 'acculturation', a buzzword in psychology and anthropology at the time of sedentarization. According to acculturation theorists, Aboriginal populations were mourning the loss of their culture, which was slowly being replaced by its dominant Other. Social suffering was therefore the result of a painful assimilation process. However, as anthropologists today have demonstrated, the issue of Aboriginal culture is much more complex than theorists and policy makers envisioned. Development programs during the re-settlement process were not sensitive to the importance of Aboriginal cultures (as they are multiple and diverse) across Canada. More specifically, they severely devalued the importance of the subsistence economy to these communities. ✻

Special Thank You

We would like to thank Michael Chandler and his team, particularly Jessica Flores and Patrice Kong, for all their hard work and efforts in assisting in the planning and hosting the NAMHR 2005 Annual Meeting.

We would also like to thank UBC First Nations House of Learning for the use of the Sty-Wet-Tan, Great Hall for the two-day meeting.

Thank you to Larry Grant, Richard Vedan, Eduardo Jovel and Linc Kesler for their kind and warm welcoming remarks.

Thank you to all the presenters, NAMHR co-investigators and collaborators who helped to make this meeting a success.

We look forward to seeing you at the next NAMHR annual meeting in 2006.

The Social and Psychological Impacts of Gambling in Cree Communities of Northern Quebec (Abstract –Presentation by Kathryn Gill, McGill University)

Gambling has been a traditional social activity of Aboriginal societies throughout the Americas, including sub-Arctic peoples (Gabriel 1999; Hill and Clark 2001). In small isolated communities of the Cree territory, gambling traditionally brought people together in a social activity that redistributed wealth within a closed system. In the past ten to twenty years however, gaming and gambling activities have increased as the population has grown in size, social complexity, and wealth. Current intra-community, locally-controlled gambling is focused on local and regional sports teams, numbers games, draws and radio bingos. It should be noted that local, intra-community gambling has been widely perceived as beneficial, providing social activities, as well as financial support for local sports teams and radio stations. In some Aboriginal communities (notably in the US) funds gathered from local gambling have been directed towards community development including health programs, community centre and youth programs. There is increasing anecdotal evidence however, that the Cree are becoming increasingly involved in a "new" gambling economy, controlled from outside the Cree communities. These new forms of gambling take place in the metropolitan casinos of Montreal and Hull, as well as the VLTs of Val d'Or, Chibougoumou and Radisson - all external points of contact of the Cree transfer economy. Within communities, local corner stores sell scratch cards and numbers games licensed through the state system. VLTs have been installed in three Cree communities, through lease-use arrangements. Cree communities appear to combine a modern version of their traditional community-based gambling with newer activities that form part of the gambling economy of Quebec. On the one hand, it could be hypothesized that community-based and Cree-controlled gambling is continuing to affirm community values while providing cultural continuity (Pasquaretta 2001). On the other hand, there is no information about the impact of gambling at casinos, the negative impact of VLTs, or the net social, cultural, and economic effects of increasing opportunities of for-profit gambling outside communities. Recently, public health workers within Cree communities have become increasingly concerned with the negative effects of gambling (increase in gambling addiction) and are concerned that gaming is replacing traditional social activities (Sabbagn, 2001). This research project was developed at the request of the Cree Board of Health Social Services of James Bay (CBHSSJB), and represents a partnership between academic researchers (K. Gill and J. Derevensky) and representatives of the CBHSSJB (J. Torrie). Refinement of the objectives, hypotheses, design and methods of the project were based on information gathered by the CBHSSJB from key informants (social workers, health care workers, elders, religious leaders) within the Cree communities. The objectives of the project are 1) to develop community case studies that will characterize the local and regional forms and patterns of gambling, access to gambling, the evolving social context of gambling, as well as the social costs and benefits of gambling with Cree communities; 2) to describe patterns of gambling in relation to demographics, social, psychological and economic factors; 3) to examine the relationship between patterns of gambling, substance abuse and associated social and psychological problems. A series of community case studies [Objective 1] are currently under development to examine the context of gambling, and data will come from existing documentation, key informant interviews, and a structured guide to gather information about each community. Qualitative research methods are planned to explore individual gambling practices and subjective experiences. A detailed survey of gambling and associated sequella [Objective 2 and 3] will be conducted using semi-structured and structured instruments in randomly selected respondents from each of the 9 Cree communities. Anticipated results include the following 1) a contribution to the emergent literature on gambling patterns and problems among Aboriginal peoples; 2) advances in the methodology of studying gambling and associated problems in northern regions, and in Aboriginal communities; 3) information that will permit local and regional governments as well as regional health and social service organizations to develop appropriate policy, prevention programs and treatment in relation to gambling. This presentation will provide an update on the information collected to date. ✻

NAMHR Mailing List

The NAMHR mailing list is for researchers, health professionals, and others interested in Aboriginal mental health. The mailing list is a useful place to pose questions or to locate resource people.

If you are interested in joining the NAMHR mailing list, send a registration request directly to the listserv program. The e-mail address of the listserv program is: LISTSERV@LISTS.MCGILL.CA.

In this e-mail please leave the subject line blank, and the body of your e-mail should contain only the following (one) line:

- SUB NAMHR *First name Last name* (Replace the first name and last name with your *first and last names*).

If you experience difficulty with the above method, please contact the Network to process your request. ✻

"Through the Pain: Post Colonial Suicide Prevention in Practice" presented by Darien Thira

By Ken Paul

The presenter began with a slide that showed the definition of suicide from RCAP. He then briefly discussed four waves of colonization of First Nations peoples, where they were initially treated as savages which required relocation into reserves, then as heathens through the criminalization of various cultural practices and loss of rights, followed by the wave of being forced to go to residential schools, and ending with experiencing colonization through treatment of individuals and communities as 'sick' and therefore requiring treatment through various social welfare services. He then shifted focus to post-colonial empowerment through illustration by way of the story of stone soup, where individuals initially did not have enough to feed others, but collectively by each contributing a little they could feed the whole community.

He then presented an outline of the community-based Aboriginal suicide prevention program, titled "Through the Pain" by first showing an overview of the five day agenda that community participants go through, which included various aspects of self that were covered each day, such as the mind on the first day, the heart on the second day, and so forth. Community participants would then identify community issues and values. He would then discuss with community participants the waves of colonization that he mentioned previously, e.g. relocation, loss of rights and criminalization of culture, and residential schools. He then contrasts the diagnostic criteria of Residential School Syndrome (RSS) from a mainstream perspective taken from the British Columbia Medical Journal and a post-colonial perspective provided by Chrisjohn, Young, and Mauraun from their 1997 book titled "The circle game: Shadow and substance in the Indian residential school experience in Canada", where the former definition medicalizes individual experiences, while the latter turns the definition around by focusing on the attitudes of the colonizers in their attempts to eradicate First Nations peoples cultures through the use of residential schools.

Shifting back to the topic of suicide, he then spoke about how suicide was not about dying but about "stopping the pain". He then discussed the statistics on suicide and then discussed how marginalized First Nations youth lack role models and resources, and have internalized prejudice. He then contrasted these youth with how First Nations Elders have a social role, which reinforces their identity, are cared for, and have respect (a voice). He then discussed how to respond to a suicidal person. He demonstrated how the suicidal person goes through a three stage process depicted in a series of slides, first though loss, then crisis, and finally trigger. How the individual responds to 'loss' depends on her/his self-esteem, then when a 'crisis' occurs it can result in a significant decrease in self-esteem, which in turn may lead to the person feeling overwhelmed by the pain of loss, which when subsequently followed by one more loss can become the 'trigger' that can lead to making the pain of living unbearable.

He then spoke about the role and attitude of a caregiver, where a caregiver has to have both values of "care" and "respect", where care is the desire for another person to be healthy and happy, and respect is the belief that the other person has the right to make her/his own decisions and capacity to respond to their own problems and that their perspectives are valid for them. He then spoke about how having "no respect" results in rescuing the person, while having "no care" results in abandoning the person. But when the caregiver has values of balanced 'care' and 'respect' she/he can assist the person through providing help, while empowering the individual's self-esteem.

He then showed a slide titled "Suicide Risk: Medicine Wheel", in which the four factors of suicide risk match the four dimensions of the medicine wheel, where the emotional dimension is demonstrated through the pain that drives one to be suicidal, the physical dimension is demonstrated by the previous history of attempts, and/or substance abuse, the spiritual dimension can provide protective factors such reasons to live, and finally the mental dimension is demonstrated by having a plan.

The next slide showed the five parts of a community in a series of concentric circles with the self and family being in the middle, then individuals (both adults and youth) in the next outer circle, community in the following circle, outside community in the next outer circle, ending up with spirituality as the outer circle. Given that time for his presentation was coming to a close he ended with another slide titled "Community resources: Self-Esteem and Identity", which had a series of concentric circles similar to the previous slide, but also showed that community resources could be mobilized to enhance a person's self-esteem and identity, through focusing on developing the community's sense of empowerment, identity, and feelings of connection. ✻

The author wishes to thank Darien Thira for providing a copy of his "Through the Pain: Community-based Aboriginal Suicide Prevention Program Participant Manual" to assist in the writing of this article. Any errors are solely the responsibility of the author.

Poster Presentations at the NAMHR Annual Meeting

Eleven (11) posters, by graduate students and NAMHR co-investigators, were presented at the recent annual meeting in Vancouver, BC. If you are interested in any of the abstracts please contact NAMHR.

Aboriginal Education Programs in British Columbia's Public School System and Their Relation to Aboriginal Student School Completion, *Julie Desroches & Grace Iarocci, Simon Fraser University*

Reconceptualizing Historical Trauma: A Case of Resilience, *Aaron R. Denham, University of Alberta*

The Ecocentric Self: An Emerging Model of Inuit Identity, *Claire Fantus, McGill University*

Coping in Difficult Times: The Tuberculosis Epidemic Among the Inuit in the 1950's, *Ebba Olofsson, McGill University*

Psychosocial Correlates of Psychological Distress Among Inuit in Nunavik, Quebec, *Ken Paul, McGill University*

Identity, Empowerment, and the Psychological Well-being of Canadian Aboriginal Youth, *Melissa Tiessen, McGill University*

First Nations Women Leaders: Community, Culture, and Youth, *Robin A. Yates & Christopher E. Lalonde University of Victoria*

Northern Health Authority and First Nations: Mental Health Concerns on Indian Reserves in the North, *John Paul Jones, University of Northern British Columbia*

Aboriginal Language Knowledge and Youth Suicide: A Further Look at Cultural Continuity, *Darcy Hallett, Jessica P Flores, Leigh L. Koopman, & Michael J. Chandler, University of British Columbia*

Suicide Among Aboriginal Youth in Canada, *Christopher Lalonde, University of Victoria & Michael Chandler, University of British Columbia*

Am I One or Many, or Both? Adolescent Conceptions of Self-unity from Opposite Sides of the Globe, *Travis Proulx, Michael J. Chandler, & Patrice Kong, University of British Columbia*

Ken Paul and Melissa Tiessen presented their projects at past CMHRU research meetings. Below are abstracts of their presentations.

Psychosocial Correlates of Psychological Distress Among Inuit in Nunavik, Quebec, *Ken Paul, McGill University*

Although literature exits on suicide amongst Inuit in Nunavik, little is known about psychological distress amongst this group. The goals of this study are to identify factors associated with distress and possible health policy implications. This research was based on a 1992 Santé Québec population-based survey of Inuit in Nunavik. Analyses were conducted at two levels. At the population level, the impact of individual significant life events (in the past year and in one's lifetime) was examined while at the age/gender cohort level variables were identified using bivariate analyses. Backwards stepwise regressions was used to identify significant variables for each level. At the population level, five variables were retained, frequency of sexual abuse, number of sexual partners in the past year, and the event of having experienced the serious illness of someone else in the household in the past year were all associated with higher levels of distress, while increased age and having a good relationship with the community was associated with lower levels of distress. At the age/gender cohort level the serious illness of someone else in the household was retained for females 15-24 and males 25-44, while frequency of sexual abuse was retained females 15-24 and 25-44. All other results show that there were unique variables associated with distress depending on the cohort. Conclusions: Since many variables associated with distress were unique for a given age/gender cohort this suggests that health policy interventions to address distress should be targeted to specific age/gender groups.

Identity, Empowerment, and the Psychological Well-being of Canadian Aboriginal Youth, *Melissa Tiessen, McGill University*

Aboriginal youth suffer from one of the lowest rates of psychological well-being in the world. Research with mainstream populations highlights the benefits of a sense of personal control for individual well-being, yet this relationship has not been fully studied with Aboriginal groups. Furthermore, power and control on a *group* level may be an important concept for Aboriginal populations, given their history of colonization and powerlessness. Thus, the present research program sought to delineate how individual and group-level factors interplay to impact well-being. Specifically, I was interested in how perceptions of control and identity, at both the individual and group levels, affect the well-being of Aboriginal youth. Residents of two Aboriginal communities in Northern Manitoba were collaborators and participants in the research. Based on community members' input on important community and youth issues, we developed and conducted two surveys on youth well-being, which were completed by students in grades 7 and up. The preliminary results suggest that perceptions of control, and strength of cultural identity, are significantly related to well-being for these youth. In particular, individual and group-level perceptions of control seem to have an impact on well-being. Ultimately, Aboriginal community members can use the results of this research to make their own decisions regarding how to best enhance and support the well-being of their youth. ✻

Roots of Resilience: Transformations of Identity and Community in Indigenous Mental Health

A funding initiative of the Canadian Institutes of Health Research and the Health Research Council of New Zealand (International Collaborative Indigenous Health Research Partnership Grant).

By Aimee Ebersold-Silva

This project is an interdisciplinary research collaboration between Canada and New Zealand which will study the factors that promote resilience in mental health among Indigenous peoples across the lifespan, focusing on the response to risk factors in early childhood, school age, adolescence and young adulthood.

The particular aims of this project are to:

- Identify what is distinctive about resilience in Indigenous communities (including remote, rural and urban populations).
- Share existing models and methods for research on resilience and assist in their development.
- Design and carry out cross-national comparative studies with the intention to identify the roles of specific social and cultural factors that promote resilience.

In Canada, the three projects of study will consist of the following:

- Stories of resilience and healing in the life experience of Indigenous people
- Characteristics of resilient communities that foster health and well-being
- Indigenous frameworks for diagnosis and treatment in mental health

In New Zealand, the projects will link to that in Canada and will consist of the following:

- Maori notions of resilience, coping, and responses to distress that can inform new approaches to diagnostic assessment in psychiatry that promote resilience.
- The development and testing of a Maori model of managing health research using the context of this research program.
- The continuation of a community based project. This will look at community responses to diabetes, in order to identify the structural and process dimensions of community resilience.

One of the researchers in New Zealand gave the term 'Maia' to the research project, This means "to have an inner strength and conviction in what one is doing and why one is doing it."

Over the course of the next five years, the Resiliency Research Program in Canada will help to give research opportunities to Aboriginal people, as the members of the research teams are affiliated with three Aboriginal Capacity and Developmental Research Environment Centers (ACADRE). These centers seek to balance Indigenous knowledge, values and community priorities with international scientific excellence.

I will keep you posted on the development of this new and very important research collaboration. ✻

"ROOTS OF RESILIENCE" Coordinator

Hello everyone. I would like to take this opportunity to introduce myself. My name is Aimee Ebersold-Silva and I am in charge of coordinating the new Resiliency Project between Canada and New Zealand. I am based at the Jewish General Hospital, in the Culture and Mental Health Research Unit, and work under the auspices of the National Network for Aboriginal Mental Health Research. Marsha Vicaire sits just at my side and helps guide me as we begin this new journey. My roots are in the areas of Southeastern Minnesota and Southwestern Wisconsin where I spent most of my years growing up along the Upper Mississippi River. This is where my Dakota, French, Swiss German, and English ancestors lived for many years before and where my home will always be. I reflect that my life has brought me many varied experiences and in closer touch with many different cultures. For the past ten years I have worked as a nurse. Four of these years I worked in Minnesota, in fields of neurological nursing and mental health nursing. For the last five years I worked in Cambridge England, in the fields of Harm Reduction and Community Drug and Alcohol Treatment. During this time also, I was accepted into Cambridge University to do a part time Masters in Primary and Community Care. It was here where I was able to write about my experience as a nurse and as a patient and became committed to research methods that allow voices to be heard. I hope that I may be able to continue in this spirit as we embark on this new project. Please feel free to contact me to introduce yourself or to let me know if you have any concerns. I can be reached by telephone at 514-340-8222 ext 2193 or by email at aimee.ebersold@mail.mcgill.ca.

I look forward to meeting you all soon.

National Network for Aboriginal Mental Health Research

WIDENING THE CIRCLE

is published by the National Network for Aboriginal Mental Health Research

CULTURE AND MENTAL HEALTH UNIT
Institute of Community & Family Psychiatry
4333 Côte Ste. Catherine
Montreal, QC H3T 1E4

PHONE:
(514) 340-8222 ext.2192

FAX:
(514) 340-7503

Visit our website at:
www.mcgill.ca/namhr

ABOUT The Network...

The National Network for Aboriginal Mental Health Research (*NAMHR)* was founded in December 2001 as a partnership between Aboriginal organizations and academic researchers across Canada to foster collaborative research. The Network is funded by the Canadian Institutes of Health Research (CIHR), Institute for Aboriginal Peoples Health and Institute for Neurosciences, Mental Health and Addictions.

The central office is based at the Culture & Mental Health Research Unit (CMHRU) of the Sir Mortimer B. Davis–Jewish General Hospital.

Contributors

AARON DENHAM, is a Ph.D. student with the Department of Anthropology, University of Alberta His previous research addresses American Indian identity and resilient responses to historical trauma.

AIMEE EBERSOLD-SILVA, is a Research Assistant and Coordinator of the Resiliency Research Project. She has a Bachelor of Science in Nursing from the University of Minnesota and a Masters of Studies in Primary and Community Care from the University of Cambridge, England. Her dissertation, entitled Positions of Vulnerability: an Autoethnographic Study, portrays her research interests in the complexities of providing and receiving nursing care, clinician and researcher reflexivity, and healing through writing of personal narrative. Her current interests lie in participatory, qualitative research methods, and in exploring her own cultural identities in the context of her family, community, and life experiences.

CLAIRE FANTUS, is in her first year of the PhD program in anthropology at McGill. Her Master's was on the topic of Inuit ecocentric identity and its relationship to land and the environment. Her current interests include- mental health, gender, anthropology of the self and embodiment.

KEN PAUL, has an undergraduate joint Honours Bachelor of Arts Degree in Economics and Native Studies from Trent University is currently in his second year of a two-year Masters of Science Degree program in Division of Social and Transcultural Psychiatry at McGill University. His first language is Mi'kmaq and his family originates from the Eskasoni First Nation in Cape Breton, Nova Scotia.

MELISSA TIESSEN, is currently in her final year of the Ph.D. degree in Clinical Psychology at McGill University. Her thesis research is a community-based project aimed at better understanding factors affecting the psychological well-being of Aboriginal youth. This interest stems from her own youth of living in a northern community with a large Aboriginal population, as well as her previous experience working for First Nations & Inuit Health Branch of Health Canada, where she learned first-hand about mental health issues facing Canada's Aboriginal people. She hopes that her research will contribute to the tools Aboriginal communities can use to support and enhance the well-being of their youth.

ROBYN YATES, is currently in her second year of the Masters of Arts Life-Span Development Psychology program at the University of Victoria. She obtained her Bachelor of Science degree in Psychology (Honours) and Anthropology from the University of Northern British Columbia. Her Masters of Arts thesis will explore what aspects of First Nations women leaders support the positive identity development and health of youth in First Nations communities within British Columbia.

Thank you to all the contributors

to this edition of

WIDENING THE CIRCLE