WIDENING THE CIRCLE

Newsletter of the Aboriginal Mental Health Research Team &
The National Network for Aboriginal Mental Health Research

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Mary Ellen Macdonald at the ICFP

Unraveling the Jurisdictional Tapestry: Understanding Mental Wellness in Aboriginal Montreal

Treena Delormier and Cori Simpson

Mary Ellen Macdonald, a doctoral candidate in the Department's of Anthropology and Social Studies of Medicine at McGill University, presented preliminary findings from her doctoral research at a general meeting of the Aboriginal Mental Health Research Team on November 1st, 2002.

Macdonald's presentation addressed questions of jurisdiction and mental health with respect to urban Aboriginal people living in Montreal. One of the central questions that her research seeks to address is "who is responsible for providing mental health services to this seemingly "invisible" community in Montreal"? According to Macdonald, there currently aren't any reliable estimates of how large the urban aboriginal community is and little information exists on its composition. Poor understandings of the urban aboriginal community are only one issue of the complex situation, questions of jurisdiction over mental health service looms largely in this picture and represents another unanswered and deeply troubling line of inquiry.

This study used participant observation and individual interviews to collect information from urban Aboriginals on their experiences within the health care system. Powerful results of the study were presented in the form of case studies, which illustrated that existing institutions and services for addressing Aboriginal mental health in the urban setting, when they do exist are terribly inadequate and arguably detrimental to the physical and mental well being of urban Aboriginals.

Macdonald presented several case studies to illustrate the jurisdictional maze that urban Aboriginals must navigate through in order to get care. In one example, an Aboriginal man was sent

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to a clinic for refugees; the logic underpinning this referral was that a clinic for refugees might be the only place where culturally appropriate care could be provided since the staff was sensitive to the needs of dislocated people! In another case study, a paralyzed Aboriginal man was forced to choose between living in his community with the treatment he required available *only* in Montreal and thus having to travel a great distance for care. The alternative was for him to remain in Montreal and to live in a homeless shelter because his band would not provide him with social assistance if he lived off of his reserve.

Macdonald clearly mapped out the complexities affecting urban Aboriginals with mental health needs. Included within this tangled web are unfair practices of band controlled services for those receiving treatment off-reserve and the provincial health care system which does not match urban Aboriginals use of service (e.g. CLSC use of postal codes defining the community provided with services, RAMQ health insurance card). The jurisdiction impasse between Canada and Quebec over Aboriginal mental health care is unclear and unresolved. In addition, some Aboriginal groups in Quebec have specific agreements with the provincial governments for health services.

Macdonald's presentation was followed by a lively discussion; among the highlighted subjects was the fact that in Montreal there are only a few organizations that service the urban Aboriginal population. There is a mistaken and uninformed assumption by many mainstream health and social service providers that Aboriginal-specific organizations such as the Native Friendship Centre of Montreal, provide the many services that the urban aboriginal community needs, when in actuality these organizations have much different functions.

We read in policy of the importance of enabling communities, Aboriginal and otherwise, to take control over their lives in order to improve their health. However, the urban Aboriginal community must be recognized first (they are currently a highly "invisible" population forced to navigate through challenging levels of federal and provincial bureaucracy). Following this, those who control mental health services must be made aware of how intolerable and appalling the existing power differentials are and how negatively they are impacting the lives of the Aboriginal population. This work provides clear examples of the inadequacies of the current health care structure with regards to the urban aboriginal community and explores the subjectivities of a people who have been "forced" through the cracks in their quest to seek help for mental health disorders.

Comments, Suggestions, Submissions

If you wish to submit an article or have information about projects, organizations, announcements or upcoming events that you would like published in ***Widening the Circle*** please contact us at cmhru.jgh@mail.mcgill.ca

Articles should be between 300-350 words and contain contact information for the said project or organization.

Contributors to this issue:

Treena Delormier is a doctoral candidate in the Department of Social and Preventative Medicine at the University of Montreal; she is a member of the Mohawk Nation of Kahnawake

Nicki Garwood is a psychotherapist affiliated with the McGill University Aboriginal Healing Clinic.

Aboriginal Healing Clinic at McGill University

Nicki Garwood

Thanks to the support of the Aboriginal Healing Foundation, the McGill Aboriginal Healing Clinic (MAHC) is celebrating six months of activity. The five objectives of the Healing Clinic are: to provide counselling to Aboriginal individuals who are primary and secondary victims of the residential school system, including those who are victims of multigenerational abuse; to provide consultation and supervision to workers who are providing services to sexual abuse survivors and their family members; to develop a team of experts in the area of child sexual abuse; to provide more public information about sexual abuse to the Aboriginal communities of Kahnawake, Kanesatake and urban Montreal, and; to evaluate service-provision to improve planning and policy-making for the affected Aboriginal population. This is an ambitious project which was the brainchild of the personnel of the McGill Aboriginal Certificate Program - Professor Ingrid Thompson and Gail Stacey-Moore - inspired by requests for services from the various Aboriginal communities.

Since its inception in September 2002, MAHC has developed points of service in Kahnawake and Kanesatake, at the McGill School of Social Work and at the Native Friendship Centre of Montreal. Clients requesting counselling services may choose the location at which they feel most comfortable or which is most convenient. There are plans to include AWASIS also as a point of service in the fall of 2003. To date, MAHC has kept pace with client demand using the expertise of four therapists, and it is hoping that, along with increasing requests for services, the AHF will see fit to support the project for an additional two years. In the event of further funding being made available, not only will MAHC be able to continue providing the present services, but also it will be able to facilitate the opportunity for clients to work with traditional healers on a regular basis.

In addition to achieving the objectives set out in the original proposal to the AHF, a very important aspect of the clinic has been the demonstrable cooperation between six different Aboriginal organizations in the region. Opportunities such as this are rare, and provide an invaluable environment for learning, healing, growth and change. If you would be interested in knowing more about this project, or you would like to access the services, you may contact Gail Stacey-Moore, McGill School of Social Work, (514) 398 2129.

Acting on What We Know: Preventing Youth Suicide in First Nations

National Advisory Group Releases Report on Preventing Youth Suicide

Assembly of First Nations Grand Chief Mathew Coon Come and Minister of Health Anne McLellan recently announced the release of "Acting on What We Know: Preventing Youth Suicide in First Nations Communities", a report issued by the eight panel Advisory Group on Suicide Prevention.

The Advisory Group on Suicide Prevention was convened in 2001 by then Health Minister Allan Rock and AFN National Chief Mathew Coon Come. Advisory members were selected by Health Canada and the Assembly of First Nations and include Aboriginal and non-Aboriginal clinicians as well as professionals with knowledge of youth suicide, health promotion and community development in First Nations communities.

The goal of the advisory group was to provide practical and attainable short and long- term recommendations to both the Minister and the National Chief that would help curb the high rate

of suicides among First Nations people. The advisory group reviewed previous studies and recommendations that have been made on First Nations youth suicide before making their own recommendations. Recommendations are structured under the following themes: increasing knowledge about what works in suicide prevention; developing more effective and integrated health care services; supporting community driven approaches; and creating strategies for building youth identity, resilience and culture.

"Acting on What We Know: Preventing Youth Suicide in First Nations Communities" is available at:http://www.hcsc.gc.ca/fnihb/cp/publications/preventing_youth_suicide.htm

Resource Materials

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Wilson, Shawn (2001). What is an Indigenous Research Methodology? *Canadian Journal of Native Education*, 25(2): pp. 175-179.

Announcements

On January 17th, 2003 The National Network for Aboriginal Mental Health Research held its inaugural Advisory Board meeting. The NNAMHR Advisory Board is composed of representatives from the following organizations: The Aboriginal Healing Foundation, The National Aboriginal Health Organization, the Canadian Centre for Substance Addiction, the Aboriginal Nurses Association of Canada, and the National Native Addictions Association.

The schedule for the Division of Social and Cultural Psychiatry's Ninth Annual Summer Program and the Advanced Study Institute are now available online. The Summer Program will run from May 5th-June 9th. For additional information please consult: www.mcgill.ca/psychiatry/transcultural/summer.html

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Aboriginal Communities and Urban Sustainability (2002), a discussion paper by Katherine Graham, professor in the Faculty of Public Affairs and Management at Carleton University and Evelyn Peters, Associate Professor of Geography and holder of a Canada Research Chair from the University of Saskatchewan, can be downloaded in PDF form from the Canadian Policy Research Networks website: www.cprn.org/cprn.html

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A PDF version of Aboriginal Sex Offending in Canada (2002), the first in a series of research reports sponsored by the Aboriginal Healing Foundation, can be downloaded from the Foundation website www.ahf.ca, research series.

The AMHRT and the NNAMHR would like to congratulate the First Peoples' House, coordinator Ellen Gabriel and the Aboriginal students at McGill University for organizing the first Pow-Wow at McGill University on October 11th, 2002.

Please take note that the National Network for Aboriginal Mental Health Research and the Aboriginal Mental Health Research Team has a new email address, we can now be reached at cmhru.jgh@mail.mcgill.ca

Widening the Circle is published by the Aboriginal Mental Health Research Team and the National Network for Aboriginal Mental Health Research.

Editor: Cori Simpson
Assistants: Kay Berckmans
Antonella Clerici

Culture & Mental Health Research Unit
Institute of Community &
Family Psychiatry
Sir Mortimer B. Davis –
Jewish General Hospital
4333 Cote Saint Catherine Road
Montreal, Quebec H3T 1E4
Phone: (514) 340-8222 ext. 5244
Fax: (514) 340-7503
Email: cmhru.jgh@mcgill.ca
Web: http://www.mcgill.ca/psychiatry/namh

Upcoming Events

6th National Métis Youth Conference

April 25th-27th in Ottawa Ontario. For more information please contact Pauline Huppie-Parsons at (613) 232-3216, toll free at 1 800 928-6330 or via email at info@metisnation.ca

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A View to the Future

Canadian Public Health Association 94th Annual Conference

May 10-13th, 2003 in Calgary, Alberta. For more information please contact**:**
conferences@cpha.ca

Division of Social & Transcultural Psychiatry, McGill University

5th Annual Advanced Study Institute in Cultural Psychiatry

Models of Mental Health Services for Multicultural Societies

June 2-3, 2003
Monday and Tuesday, 9AM – 5PM
Institute of Community & Family Psychiatry
4333 Cote Saint Catherine Road
Montreal, Quebec H3T 1E4

The fee for the Advanced Study Institute is $250 ($125 for full-time students). The fee for one-day attendance is $125 ($75 for full time students). There is no charge for faculty and trainees of the McGill Department of Psychiatry, who must still register.

Send name, professional affiliation, address and registration fee to Consuelo Errazuriz, Continuing Education Coordinator, Division of Social and Transcultural Psychiatry, McGill University, 1033 Pine Avenue West, Montreal, Quebec, Canada, H3A 1A1

Telephone: (514) 398-7302, Fax: (514) 398-4370, Email: tc.psych@mcgill.ca

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McGill University, Department of Psychiatry
Division of Social & Transcultural Psychiatry

9th Annual Summer Program in Social and Cultural Psychiatry

Ethics and Practice of Participatory Community Research – June 9th, 2003, 9am-6pm

This workshop facilitated by **Dr. Ann Macaulay & the Kahnawake Community-Researcher Team** will address participatory research theory; building and maintaining healthy and respectful research partnerships; developing collaborative project strategies; ownership of research data, in addition to discussing the development and application of the Kahnawake Schools Diabetes Prevention Project Code of Research Ethics.

For more information about the Summer Program in Social and Cultural Psychiatry please call (514) 398-7302 or email tc.psych@mcgill.ca