

# WISE PRACTICES

## FOR PROMOTING LIFE IN FIRST NATIONS COMMUNITIES

### NURTURING YOUTH IN COMMUNITY: WHAT THE LITERATURE SAYS

#### YOUNG PEOPLE IN COMMUNITY CONTEXT

When exploring stories of stress and suicide prevention among Pacific Northwest Indian youth, Strickland and Cooper (2011) heard a range of stories about “getting into trouble” (p. 243). The youth interviewed spoke of trouble with school, police, and family, and that “being Indian put them at risk” (p. 243). Furthermore, the strategies they devised to cope with all of this tended to put them at even greater risk for trouble. They strived to stay “on track” and hoped for **MORE CULTURAL ACTIVITIES, ECONOMIC DEVELOPMENT, TRIBAL UNITY, and OPPORTUNITIES TO CONTRIBUTE TO THEIR COMMUNITIES** in meaningful ways (p. 246). Rather than pointing to individual/psychological interventions, this research suggests the potential significance of efforts that address matters of community concern and social justice. A review of the literature about Indigenous youth suicide by Harder et al (2012) also indicates some of the complexities that go beyond both an individual focus and cultural continuity, to promote “the **INTEGRATION** of social, family, education and training, job creation, and other elements that bring cohesion to a community. Indigenous youth suicide must be addressed as a community by forming **COMMUNITY COHESION**” (p. 139).

Finlay et al (2010) present “a framework for understanding the wellbeing of children, youth and their families in remote First Nations communities in Ontario” (p. 249), which integrates “the social determinants of health, factors recognizing the northern context, and First Nations cultural perspectives” (p. 249). Factors in the framework include: colonization, globalization migration, cultural continuity, access, territory, poverty, and self-determination along one axis, and aboriginal status, early life, education, employment and working conditions, food security, health care services, housing, income and its distribution, social safety net, social exclusion, unemployment and employment security, communications, and cost of goods along the other (p. 250). The idea is that the framework can **HELP COMMUNITIES DETERMINE THEIR OWN STARTING POINTS** for partnerships addressing community wellbeing, based on their unique configuration of these factors.

#### COMMUNITY BASED APPROACHES

Mignone and O’Neil (2005) explored links between social capital and youth suicide in First Nations communities. According to these authors, social capital refers to “the quality of interactions among people in specific situations and places” (p. S51). While they did not find conclusive evidence of a correlation, they have made recommendations based on existing research that suggests communities with greater social capital are those in which suicide risk is lower. They point out that if it is found that social capital is a determinant of youth suicide risk, this would have significant implications for policy development “because the risk of suicide among youth in First Nations communities would be impacted to a large extent by policies defined **OUTSIDE OF TRADITIONAL MENTAL HEALTH POLICY** and program areas” (p. S53). This idea does not dramatically differ from one proposed by Wexler and Gone (2012) some years later. They conclude that effective and **CULTURALLY RESPONSIVE SUICIDE PREVENTION** in Indigenous communities would be more likely to come in the form of **COMMUNITY PROJECTS** than health services.

Community-based initiatives vary in response to the particular communities from which they emerge. That said, they “they are typically empowerment oriented, variously involve the development of local and tribal partnerships,

include school-based curricula, provide community adult involvement in some capacity, and coordinate out of school services for youth" (Allen et al, 2014, p. 104). **COLLABORATIVE** development is also often emphasized.

One particular study identifies significant findings when it comes to successful community development in relation to suicide prevention and life promotion. When conducting research among rural Yup'ik Alaska Native youth, Philip et al (2016) found that **CONNECTIONS TO ADULTS** (as opposed to peers) were understood as an important protective factor in relation to family and community but not individual level. Adults included immediate and extended family, Elders, and other community members. This points to "an inherent strength of Alaska Native community life and culture, with family providing for young people a consistently strong social support network" (p. 51). The finding also suggest that "more network density and increased closeness may have a positive impact on **FAMILY PROTECTIVE FACTORS**" (p. 52).

McCalman et al (2016) explore existing literature about suicide prevention and report that there is very little evidence of successful suicide prevention for Aboriginal youth. The most promising approach, however was **MENTORSHIP**: "Most effective are culturally-tailored, long-term, formal, one-on-one, integrated mentoring models that account for mentor competence and support and which are integrated into broader support services and programs, producing a greater level of positive change" (p. 4).

#### LIFTING YOUNG PEOPLE UP WITH/IN COMMUNITY

Hawai'i's Caring Communities Initiative (HCCI) trains and mobilizes "youth and community members in suicide prevention and develop community awareness activities" (Chung-Do et al, 2011, p. 109). It is not only focused on Indigenous youth, but rural and ethnic minorities. "By focusing on teambuilding opportunities, youth **EMPOWERMENT STRATEGIES**, and evidence-based suicide prevention training, HCCI's youth leaders applied their newly acquired training and skills to develop and implement suicide prevention awareness activities and events" (p. 109). As a way of evaluating how this was experienced by young people, they tracked "the number of people reached by community activities, as well as the number of people identified to be at risk for suicide and connected to appropriate mental health services ... Additionally, focus groups and interviews were conducted with youth leaders and coordinators to understand the impact of the HCCI approach, as well as lessons learned" (p. 116).

The project was deemed successful, and the authors discuss a number of factors that may have contributed to its success: prioritizing relationships, increasing self-efficacy through mentorship, taking sufficient **TIME UP FRONT** to establish these relationships and group identity, providing plenty of communication and face-to-face opportunities to nurture university and community partnerships, building connections among projects across the island (which

#### PARTICIPANT VOICES

LYRICS FROM RAP CALLED 'LIVING LIFE', WRITTEN BY YOUTH ACTION COUNCIL MEMBERS (SASKATCHEWAN):

Life ain't easy when faced with difficult things. But in a wounded world, the eagle still spreads his wings.

LINDA CAIRNS, PAGC YOUTH ACTION COUNCILS (SASKATCHEWAN):

The youth had a purpose; they began to feel a sense of belonging ... They were given tasks and responsibilities. They are all volunteer – which is in itself very remarkable.

JARED SETTEE, PAGC YOUTH ACTION COUNCIL REP (SASKACHEWAN):

I love going to Pine Bluff. Every time I go there, I feel like I'm home already.

helped strengthen each individual community project as well), and having a strong coordinator who collaborated well with youth and was connected to the community (Chung-Do et al, 2011; see also Chung-Do et al 2014).

Crooks et al (2010) showcase a range of projects initiated within the Thames Valley District School Board (in London, Ontario) aimed at improving relationships and engagement for First Nations youth. The first is a peer mentoring project, which connects older students who are connected to school with younger/newer students. The next project is a First Nations Cultural Leadership course offered for credit at the school. The third project is Grade eight transition conferences: “to prepare senior elementary school students for a **SUCCESSFUL TRANSITION** to high school” (p. 165). The conferences include a strong cultural component, as well as a focus on school connectedness.

Evidence has been gathered of increased engagement. Indicators include behavioural, cognitive, and attitudinal. Future efforts will continue to focus on and expand those that are already going well. They will also seek to **BUILD SYSTEM CAPACITY** to provide stability for these projects (Crooks et al, 2010).

Crooks et al (2010) make the case for **STRENGTH-BASED PROGRAMMING** that is culturally appropriate, particularly for First Nations youth in Canada as it helps to see current negative outcomes as resulting from “the deliberate suppression and elimination of culture and tradition [which] led to multi-generational trauma” (p. 161) rather than an indication of individual pathologies. While **YOUTH ENGAGEMENT** can look many different ways, “it is a nonspecific protective factor that has been connected to a wide range of positive outcomes” (p. 161) – and it is congruent with a strength-based approach.

## REFERENCES

- Allen, J.; Mohatt, G.; Beehler, S.; & Rowe, H. (2014). People awakening: Collaborative research to develop cultural strategies for prevention in community intervention. *American Journal of Community Psychology*, 54, 100-111.
- Chung-Do, J.; Goebert, D.; Bifulco, K.; Tydingco, T.; Alvarez, A.; Rehuher, D.; Sugimoto-Matsuda, J.; Arume, B.; & Wilcox, P. (2011). Hawai'i's Caring Communities initiative: Mobilizing rural and ethnic minority communities for youth suicide prevention. *Journal of Health Disparities Research and Practice*, 8(4), 108-123.
- Chung-Do, J.; Napoli, S.; Hooper, K.; Tydingco, T.; Bifulco, K.; & Goebert, D. (2014). Youth-led suicide prevention in an Indigenous rural community. *Psychiatric Times*, p. 1-4. <http://www.psychiatrictimes.com/cultural-psychiatry/youth-led-suicide-prevention-indigenous-rural-community>.
- Crooks, C.; Chiodo, D.; Thomas, D.; & Hughes, R. (2010). Strengths-based programming for First Nations youth in schools: Building engagement through healthy relationships and leadership skills. *International Journal of Mental health and Addiction*, 8, 160-173.
- Finlay, J.; Hardy, M.; Morris, D.; & Nagy, A. (2010). Mamow Ki-ken-da-ma-win: A partnership approach to child, youth, family and community wellbeing. *International Journal of Mental Health and Addiction*, 8, 245-257.
- Harder, H.; Rash, J.; Holyk, T.; Jovel, E.; & Harder, K. (2012). Indigenous youth suicide: A systemic review of the literature. *Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health*, 10(1), 125-142.

McCalman, J.; Bainbridge, R.; Russo, S.; Rutherford, K.; Tsey, K.; Wenitong, M.; Shakeshaft, A.; Doran, C.; & Jacups, S. (2016). Psycho-social resilience, vulnerability and suicide prevention: Impact evaluation of a mentoring approach to modify suicide risk for remote Indigenous Australian students at boarding school. *BioMed Central Public Health*, 16(98), 1-12.

Mignone, J. & O'Neil, J. (2005). Social capital and youth suicide risk factors in First Nations communities. *Canadian Journal of Public Health*, 96(1), S51-S54.

Philip, J.; Ford, T.; Henry, D.; Rasmus, S.; & Allen, J. (2016). Relationship of social network to protective factors in suicide and alcohol use disorder intervention for rural Yup'ik Alaska Native youth. *Psychosocial Intervention*, 25, 45-54.

Strickland, J. & Cooper, M. (2011). Getting into trouble: Perspectives on stress and suicide prevention among Pacific Northwest Indian youth. *Journal of Transcultural Nursing*, 22(3), 240-247.

Wexler, L. & Gone, J. (2012). Culturally responsive suicide prevention in Indigenous communities: Unexamined assumptions and new possibilities. *American Journal of Public Health*, 102(5), 800-806.