Indigenous people, trauma and suicide prevention
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First Nations, Inuit and Métis are collectively referred to as Indigenous people in Canada.

Indigenous people in Canada have some of the highest suicide rates in the world, but there are also many communities that have very low rates of suicide.

Historically, suicide was a very rare occurrence among First Nations and Inuit (Kirmayer, 2007). It was only after contact with Europeans and the subsequent effects of colonialism that suicide became prevalent.

Intergenerational trauma is one of the primary colonial effects contributing to the elevated rate of suicide among Indigenous people.
What to expect

The purpose of this toolkit is to provide a brief introduction to people in the general population about trauma and suicide in Indigenous people.

You’ll learn about statistics, intergenerational trauma, why some Indigenous people may be more at risk for suicide than the general population, how these suicides can be prevented, and how life can be promoted.

• If you or someone you know is actively thinking about suicide, call 1-833-456-4566. Your call will be answered by the Canadian Suicide Prevention Service who will then connect you to a crisis centre in your area. In an emergency, call 911.

• Indigenous people in Canada can also call Hope for Wellness at 1-855-242-3310, or connect online via chat with a counsellor at hopeforwellness.ca.

Both crisis lines are toll free and available 24/7.
Statistics

INDIGENOUS PEOPLE MAKE UP 4.9% OF THE POPULATION IN CANADA: OVER 1.6 MILLION (Statistics Canada, 2018).

INDIGENOUS PEOPLE HAVE NEARLY 4 TIMES THE RISK OF EXPERIENCING SEVERE TRAUMA THAN THE NON-INDIGENOUS POPULATION (Haskell & Randall, 2009).

SUICIDE AND SELF-INFLICTED INJURIES ARE THE LEADING CAUSES OF DEATH FOR FIRST NATIONS YOUTH AND ADULTS UP TO 44 YEARS OF AGE (Public Health Agency of Canada, 2016).

FOR FIRST NATIONS, THE SUICIDE RATE IS 3 TIMES THE NATIONAL AVERAGE.

FOR MÉTIS, THE NATIONAL AVERAGE & 2 TIMES THE NATIONAL AVERAGE.

FOR INUIT, THE NATIONAL AVERAGE 9 TIMES THE NATIONAL AVERAGE.

(Kumar & Tjepkema, 2019).
BACKGROUND

Indigenous people have experienced, and may continue to experience, collective trauma stemming from colonization, the effects of which are passed on from one generation to the next; this is referred to as intergenerational trauma. Colonization led to the forced settlement of nomadic tribes, relocation from traditional settlements, forced removal of children from their homes into residential schools or non-Indigenous homes or orphanages (“Sixties Scoop”) (Linklater, 2014; Haskell & Randall, 2009). Colonization led to losses of culture, traditional values, and family stability, as it was made impossible, in many cases, for parents and Elders to pass along vital cultural knowledge and resilience to children who were taken away. In addition, relocation and settlement took many Indigenous people away from their traditional ways of living and thriving (Elias, 2012).

IN CANADA, 52% OF CHILDREN IN FOSTER CARE ARE INDIGENOUS, WHILE ONLY 7% OF CHILDREN IN CANADA ARE INDIGENOUS (INDIGENOUS SERVICES CANADA, 2020).

The current child welfare system continues to be especially traumatic for Indigenous youth.

Why is suicide an issue in Indigenous people?

A RISK OF SUICIDE

Anyone who has experienced trauma is at greater risk for suicide. Most people receiving treatment for mental health issues have had some form of trauma (Rosenberg, 2011), and trauma places people at higher risk for additional mental health issues such as depression and addiction.

When people have healthy coping mechanisms and strong support systems, they are better equipped to heal from trauma. Not only did acts of colonialism cause trauma in Indigenous people, but it also affected their means of coping with and healing from trauma. This is how intergenerational trauma continues to negatively affect generation after generation of Indigenous people today (Linklater, 2014; Haskell & Randell, 2009).

COPING WITH TRAUMA

People who have experienced trauma will cope with it in some way, whether they are aware of it or not, and some ways of coping may contribute to suicide risk.

Some ways in which people may cope with trauma that can lead to increased suicide risk include:
- Drinking alcohol or taking drugs to excess (may lead to addiction)
- Isolation from support systems
- Self-harm

These coping mechanisms can increase a person’s risk of suicide. They, and the experience of trauma generally, may lead to:
- Depression and mental illness, sometimes leading to suicide
- Feelings of hopelessness
Life promotion in Indigenous communities

Suicide prevention and life promotion are interconnected: everything that promotes life can also prevent suicide.

Historically suicide prevention focused more specifically on preventing suicide, for example, by intervening with someone who is in crisis. Life promotion and suicide prevention are broad terms that can include things like healthy living activities.

Life promotion practices are most effective when they are developed and implemented by Indigenous communities themselves (Wise Practices, 2021). Strategies must be formulated in response to local cultural meanings and practices (Wexler, 2012).

To learn more about life promotion practices, check out the Wise Practices website: https://bit.ly/3ust717

To learn about community-led suicide prevention plans, check out our guide, co-developed with Knowledge Keepers from across Alberta: https://bit.ly/2TcNSkr
Promoting life through hope, belonging, meaning and purpose

The First Nations Mental Wellness Continuum Framework proposes four key elements that are integral to mental wellness: hope, belonging, meaning and purpose. These four aspects work together and, when aligned, contribute to the mental wellness of individuals and communities.

“From coast to coast, First Nations people have said that: a connection to spirit (identity, values, and belief) promotes hope; a connection to family, community, land, and ancestry promotes a strong sense of belonging; knowing who one is and where one comes from allows one to think and feel and understand life from an Indigenous perspective and promotes a sense of meaning; and an understanding of the unique First Nations way of being and doing in the world promotes purpose” (Thunderbird Partnership Foundation & Health Canada, 2015, p.13).

The continuum is a strengths-based framework illustrated as a medicine wheel. It can be used to develop mental wellness policies and programs and can inform how individuals work towards mental wellness.

Resilience in Indigenous communities

Indigenous communities build resilience through their culture (Doria et al., 2020).

Resilience goes hand-in-hand with life promotion: anything that builds resilience also promotes life. Many aspects of Indigenous culture have been found to contribute to resilience against suicide, including:
- a strong connection between Indigenous Elders and youth
- speaking the Indigenous language
- practicing spirituality (Doria et al., 2020; Chandler & Lalonde, 2008)

Autonomy has also been found to be a factor contributing to resilience in Indigenous communities. Communities with control over their services have been found to have lower rates of suicide, including control over: government, land, education, police, fire, and health services (Chandler & Lalonde, 1998; Chandler & Lalonde, 2008; Kral, 2016).

Communities with strong cultural practices and control over services often have lower rates of suicide (in some cases, zero suicide) (Chandler & Lalonde, 2008; Kral, 2016).

27% of the Indigenous population is under 14 years old, compared to 16% of the general population (Statistics Canada, 2017).

The Truth and Reconciliation Commission of Canada (2015) recommends that the federal government “establish multiyear funding for community-based youth organizations to deliver programs on reconciliation, and establish a national network to share information and best practices” (p. 8).
Indigenous people in urban centres

54% of First Nations (both status and non-status), Inuit and Metis now live in cities and towns (Place, 2012).

In addition to intergenerational trauma, Indigenous people living in urban centres may face the following challenges, or face them more frequently, than those living in community:
- discrimination and racism
- challenges to their cultural identity
- feelings of isolation
- loss of connection with land, Elders, and spiritual ceremony
- difficulty finding culturally appropriate services

RESILIENCE IN AN URBAN SETTING

Indigenous people living in urban centres can build resilience by retaining a connection with their culture and traditional knowledge, for example, through communication with Elders and/ or by participating in ceremony. They can also find meaning and hope in nature and the land even in an urban context (Hatala et al., 2020).
Suicide is not the only negative outcome where Indigenous people are over-represented. We see similar trends in homelessness and incarceration. While only 3% of people in Canada are Indigenous, they make up 22% of people in the correctional system (Environics, 2010). Systemic racism in Canadian police forces and in the legal system are at the heart of these numbers. The Royal Canadian Mounted Police force was set up in the 19th century to guard against American attacks but also to facilitate the colonization of Indigenous lands in western Canada: they were founded on the idea that the Indigenous population must be contained. The RCMP aided settler passage and the ultimate colonization of Indigenous lands so that settlers could live on them and exploit their resources. As for the Canadian legal system, many Indigenous people were, and continue to be, brutally and unfairly treated, resulting in highly disproportionate numbers of incarceration. The system has not been fixed and systemic racism persists in that system, as well as in the police force, today (Chartrand, 2020).

Racism is also at the root of the high rate of homelessness for Indigenous people, which is 8 times higher than for those in the general population (Belanger et al., 2013). This inequality, caused by racism in our systems, has meant that many Indigenous people do not have the same opportunities as white people and others in the general population. The result is that many Indigenous people have limited access to education and employment, and therefore a higher instance of poverty, which may lead to homelessness and ‘unlawful’ behaviour (E. Connors, personal communication, February 18, 2021).

The rate of homelessness also speaks to the many failures of the reserve-system and how so many Indigenous people fall through the cracks, unsupported by the system, in an urban setting. Far too many do not qualify as having “Indian Status” and fail to receive adequate supports. The result is a highly disproportionate rate of Indigenous people experiencing homelessness and exposure to incarceration, violence and death.
Another way that suicide can be prevented among Indigenous people is through the treatment of trauma. This can happen through Indigenous service providers, traditional healers, or in mainstream healthcare settings.

**EFFECTIVE TRAUMA-TREATMENT FOR INDIGENOUS PEOPLE SHOULD:**

- be informed by Indigenous peoples themselves
- be culturally relevant
- strengthen bonds with Indigenous traditions and heritage
- foster resilience, which helps those exposed to trauma survive, resist and cope with its destructive effects
- understand that a traumatized person’s behaviour is a normal response to trauma
- embrace a strengths-based approach (as opposed to a deficiency-based approach which focuses on the flaws in the “character” of the trauma survivor)
- respect the individual and their culture and treat them with dignity
- acknowledge the physical, mental, emotional and spiritual aspects of one’s overall health
- be non-linear and adapted for the needs of each individual

(Haskell & Randell, 2009; Linklater, 2014)
Providing culturally appropriate services

Cultural safety and competence are key components in providing services to Indigenous people. Without them there are greater chances of inaccurate or inappropriate assessments, inadequate treatment, and risk of re-traumatization (Twigg & Hengen, 2009).

In order to effectively treat traumatized people who are Indigenous, those working with them:

• need to be trained to deliver a trauma-informed approach in an Indigenous context
• must be aware of the interplay of traumatic historical events and social conditions that impact both the community and the individual (Haskell & Randell, 2009; Linklater, 2014)

Collaborative Practices: “Two-eyed seeing”

The best health outcomes of Indigenous peoples are achieved when they provide leadership in addressing their own trauma and mental health. However, collaboration between mental health providers, who offer more mainstream approaches, and affected communities can also be effective, when communities decide to include them.

“The learning to see from one eye with the strengths of Indigenous knowledges and ways of knowing, and from the other eye with the strengths of Western knowledges and ways of knowing...and using both these eyes together, for the benefit of all” Eskasoni Mi’kmaq Elder Albert Marshall (Hogue & Bartlett, 2014, pp. 30-31).
Trauma-Informed Care (TIC) is a determined effort to implement a better approach to treating people that takes into account the impact that previous traumatic experiences have had on an individual’s overall mental health.

Most Indigenous communities base their healing practices on the belief that connection with nature and community is vital to the overall health of an individual, while TIC stresses the well-being of the individual. Despite this difference, both traditional Indigenous healing practices and TIC share common elements.

Read more about treating trauma in iE13: Trauma-Informed Care: Trauma, substance abuse and suicide prevention or in our resource toolkit on the topic: https://bit.ly/3pZ8Lw3

WHAT IS WRONG WITH YOU?” HAS SHIFTED TO “WHAT HAS HAPPENED TO YOU?” (ROSENBERG, 2011).
Healing through culture

“Culture as healing’ is an Indigenous approach to life promotion that addresses the whole unique person, in the context of (their) family, community, land, history, and spiritual world. Culture as healing aims to deepen connections with self, others, and land as a path towards wholeness and well-being, in keeping with Indigenous values of holism and interdependency. It recognizes healing as simultaneously a deeply intimate and personal experience and a relational and collective process. When we support the healing of others we are also doing the work of healing the community now and into the future.” (An excerpt from Wise Practices)

According to Wise Practices, healing through culture includes:

- Building and nurturing relationships with family, community, and land
- Revitalizing language and teachings
- Avoiding one-size-fits-all approaches, which would look different depending on who you are, where you are, and with whom you’re working (Wise Practices, 2021)
Restorative justice and historical trauma

Restorative justice attempts to repair the harms done to people and relationships through wrongdoing. It tries to restore those damaged relationships and ensure that everyone involved is treated with equal concern, respect, and dignity.

It is not a return to the past but the creation of a better future (Llewelyn, 2008). People are interconnected and when wrongs are perpetuated it affects not only the victim and offender but the fabric of society.

Restorative justice owes much to the insights of Indigenous conceptions of justice. It is a restoration of balance and harmony like that represented by the medicine wheel (Llewellyn, 2008). The Truth and Reconciliation Commission in Canada is one such example of an organization dedicated to restorative justice.
REFERENCES


We are the Centre for Suicide Prevention, a branch of the Canadian Mental Health Association. For 40+ years we have been equipping Canadians with knowledge and skills to respond to people at risk of suicide.

We educate for life.