

Sheridan | Faculty of Applied Health and Community Studies

Perspectives on Indigenous Mental Health

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Abstract

This study focused on Social Service practitioners and their perspectives on indigenous mental health, the challenges that indigenous communities face, and their understanding of current approaches on mental health services. This qualitative study used a narrative design approach and collected data through semi-structured, face-to-face interviews which took place with five practitioners which included two Child and Youth workers, and three Social workers who are also Registered Early Childhood Educators. Six themes emerged from the interviews: need for advocacy and awareness of indigenous knowledge and communities, lack of accessible and quality resources, overrepresentation of indigenous youth in Government services, insufficient Government support, intergenerational trauma, and identity loss. Most participants in this study placed an emphasis on the overrepresentation of indigenous youth in Government services, participant four in particular stated "When I did harm reduction there was a high percentage of indigenous youth" (Participant four, Interview, January 30, 2020). The social service practitioners provided insights into their own current methods of practice used in supporting mental health in today's youth as well as insights into mental health in indigenous youth and communities. The findings suggested the need for (i) a higher indigenous population of social service workers, (ii) informed, best practices to better meet the needs of indigenous communities and (iii) more Government support is needed in order to help indigenous youth and communities thrive.

Introduction

Recent literature acknowledges the need for supporting indigenous communities as current statistics provide evidence of data highlighting the overrepresentation of indigenous populations in Government services and facilities. For many years, the mental health of indigenous youth has caused alarm for reasons including high rates of suicide, homelessness, and overrepresentation in shelters as well as correctional facilities. Despite what recent literature states, current methods and practices in the field of mental health services still use westernized approaches which does not support or meet the needs of indigenous communities. As such, poor mental health in indigenous youth is on the rise and today, at an all-time high. Statistical data supporting the increase of poor mental health in indigenous youth and communities is of major concern as there has been a significant increase in both genders, ages, and indigenous tribes from the classification "excellent or very good perceived health" to "fair or poor perceived health", from the years 2001 to 2012 (Statistics Canada, 2019).

Literature Review

Mental health is known to be stigmatized in society and now more than ever, it is important to acknowledge and recognize the existence of this stigma in indigenous communities. It is also important to address the large gap in literature regarding the mental health of indigenous youth and communities (Azpitarte, 2019; Chenhall 2010). Recent literature highlights the demand of current methods of practice needing to be re-evaluated and reformed, due to the lack of current methods of practice meeting the needs of the indigenous population (Peterson, Huston, & Loon, 2019). Further, there are countless research studies that emphasize the lack of sufficient qualitative research on the topic of indigenous studies (Azpitarte, 2019; Chenhall 2010). Figure 1.1 addresses the current challenges and barriers that indigenous youth and communities; reflected both in existing literature and this research study.

Figure 1.1: Barriers Indigenous Communities Face



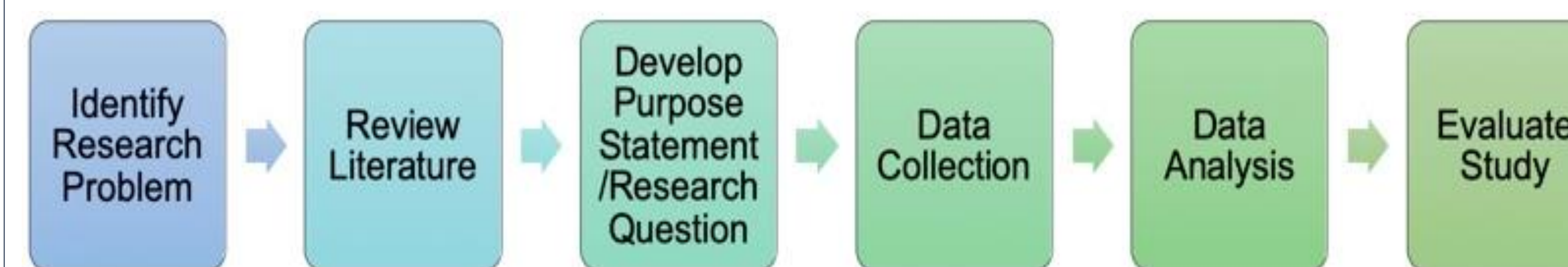
These findings are prevalent in the literature and despite the encouraging rise of indigenous youth practicing advocacy in their communities, the overall mental health of the indigenous youth population continues to reportedly become a major concern. Another major concern presented in the literature is the use of current westernized practices and approaches on mental health services, which are not responsive due to the lack of indigenous knowledge and cultural sensitivity. Kilian and Williamson (2018), addressed the need for indigenous perspective and input on health care services and practices to ensure cultural relevance, safety and sensitivity. In light of current and existing gap of literature on the mental health of indigenous youth and communities (qualitative studies in particular), the principal investigator conducted a qualitative study on the topic of Indigenous mental health, with a particular focus on indigenous youth as well as the current practices offered through a wide-range of social services. The purpose of this study included exploration of how the perceptions and practices of social service workers may impact the mental health of indigenous youth. The primary research question that this study investigated was: *what are Social Service practitioners' perspectives of how they support mental health issues in indigenous youth and communities?*

Methodology

Research Design

Due to current literature stating the lack of studies surrounding indigenous topics (qualitative research studies in particular), the principal investigator decided on a qualitative research design with a narrative approach. The research design involved one-on-one, semi-structure, and open-ended interviews conducted by the principal investigator. A qualitative research design was chosen because the nature of a narrative approach offers more context-rich data. The researcher engaged in purposeful sampling, and recruited specific participants that work in the field of social services. The principal investigator formulated a series of questions including sub-questions and probes that were used to gain deeper insight on current perspectives and practices, which enhanced the process of data collection. These questions were created to help answer *what are Social Service practitioners' perspectives of how they support mental health issues in indigenous youth and communities?* and were also created to support social service workers in voicing their perspectives on indigenous mental health, as well as the reflection of current practices that are significant in supporting the mental health of indigenous youth and communities. After data collection, the process of data analysis began.

Figure 1.2: Research Process



Instrument

The primary instrument tool that the researcher used for data collection was interviews. The interviews were one-on-one, open-ended, semi-structured interviews that consisted a total of nine questions with sub questions and elaborative probes to enhance the richness of data collected. All interviews were completed within a one-week window, and ranged from thirty minutes to an hour; however three of the five interviews went over the hour mark. The interviews were audio-recorded by using the voice memo application on the researcher's smartphone. Once all interviews were complete, the researcher transcribed data onto a word document and analyzed the transcribed data by searching for emerging themes by coding. Once data analysis was complete, the audio recordings were deleted.

Procedure

Prior to data collection, and after the recruitment of social service workers, the principal investigator and participants agreed on a meet-up location, date, and time. Once the researcher met up with the participants, a sound recordings form, and letter of invitation and research consent form was given to the participants. Once all documents were reviewed, and signed, the principal investigator proceeded to deliver the interview protocol that further informed the participants on the research topic, research problem, research question, and objective/ purpose of the study. The researcher also reminded the participants that they were free to withdraw from the study at any given time, without any consequence and had the option of member checking in case either of the participants wished to remove any unwanted information. Once this step was complete, the researcher proceeded with the interview by asking all questions, sub-questions, and elaborative probes. Following the completion of all interviews, the principal investigator transcribed the data that was gathered, and proceeded to search for relevant themes and completed coding. After analyzing the gathered data, the principal investigator deleted all audio recordings.

Participants

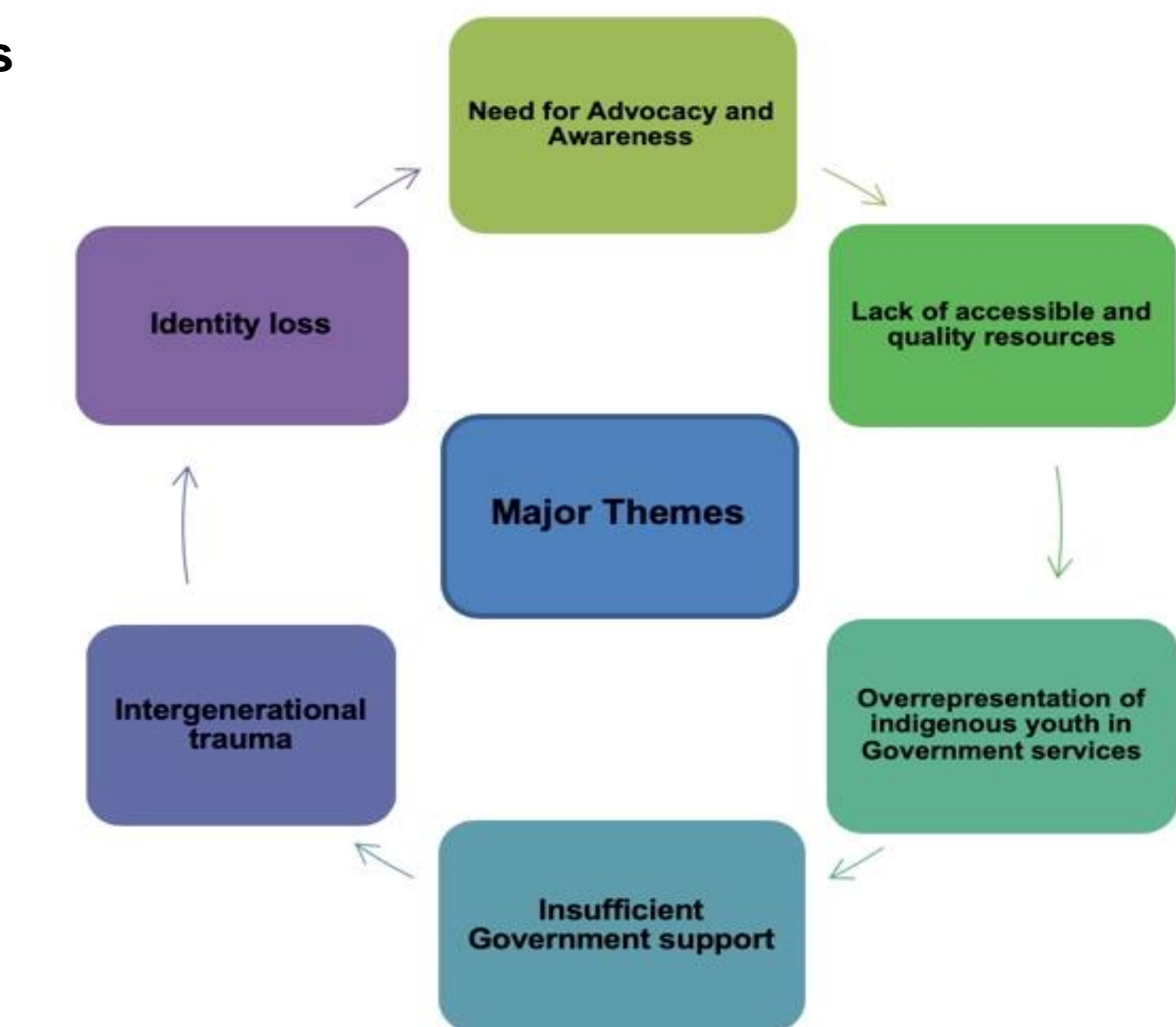
The participants in this study were recruited through purposeful sampling (all five participants are social service practitioners). The researcher also recruited the participants through convenience sampling; though the researcher knows all five participants at a professional level, there has never been a power relationship between either of the participants and the researcher. Social Service practitioners were selected precisely due to the important roles that their professions play in supporting the mental health and well-being of youth and communities. Three of the five participants are Social Workers, and the remaining two are Child and Youth Workers. Two of the five participants are also registered Early Childhood Educators. One of the five participants have indigenous background, the remaining participants did not identify as indigenous. Further, 60% of participants have experience working with indigenous youth and 60% has worked for shelters or foster care, while all five participants have experience working in childcare at some point in their career.

Results and Discussion

Results

This research study supports current literature, and offers diverse viewpoints of the social service practitioners that participated in the study. The process of data analysis resulted in the emergence of six major themes: need for advocacy and awareness of indigenous knowledge and communities, lack of accessible and quality resources, overrepresentation of indigenous youth in Government services, insufficient Government support, intergenerational trauma, and identity loss. Participant four emphasized the need for advocacy and awareness by highlighting the importance of trust, validity, and reliability between youth and social service practitioners in the field for quality services, "there has to be more people within their community to give those services because they understand the trauma that they've lived the generational poverty they've gone through and you know, they can relate on a more personal level...we have to be more diverse, and have more diversity within our services" (Participant four, Interview, January 30, 2020). Participant two and four stressed on lack of accessible quality resources as both discussed services and programs being hard to access due to high demand and waitlists; "it's hard to access services within an acceptable time frame because you have people waiting like 2 or 3 years for services" (Participant four, Interview, January 30, 2020). Participant five highlighted the overrepresentation of Indigenous youth in Government services; "in foster care there are a lot of indigenous youth" (Participant five, Interview, January 31, 2020). Participant five also expressed insufficient Government support "the government is not doing their job for them at all especially putting them in areas where their cost of living and conditions is disgusting" (Participant five, Interview, January 31, 2020). Moreover, participant four stressed on intergenerational trauma and identity loss; "we know that generational trauma is very real, and it's been passed down and has affected their lives greatly" (Participant four, Interview, January 30, 2020). All themes encompass the absence of federal Government support. These themes derived from the concepts and perspectives of each participant, commonalities between participants were demonstrated throughout data collection and analysis. In addition, this research study emphasizes that there is a lot to do to help support indigenous communities. This includes raising awareness and practicing advocacy among social service practitioners and communities. Further, the results of this study places a strong emphasis on the need for more indigenous social service workers to support indigenous youth and communities that may need mental health services.

Figure 1.3: Major Themes



Discussion

One limitation is that the researcher knows all five participants, and though there has never been a power relationship between the researcher and participants, this could have been a source of potential bias. Another limitation is that there were only five participants, and only one of the participants has indigenous descent. This research study supports the high demand for more indigenous social service workers in the field as it may be extremely beneficial for indigenous youth and communities that seek mental health services. Implications for future research would be to conduct research on indigenous social service workers as well as indigenous youth, and how the methods of practice of an indigenous social service practitioner influences the mental health of indigenous youth and communities. Additionally, this research study supports the need for current methods of practice to be re-evaluated and reformed to express cultural knowledge and sensitivity to meet the needs of indigenous communities.

Figure 1.4: Bridging the Gap of mental health services for Indigenous youth and communities

