WATERLOO REGION SUICIDE PREVENTION COUNCIL

Suicide Information and Awareness is Important - You're not Alone

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Waterloo Region Suicide Prevention Council

Protective Factors and Suicide: Cultural Renewal and Community Development in a First Nations Community

Karl Torbicki

February In 2006. 18 university students travelled to a First Nations community to learn about life in an isolated Northern reserve and volunteer with youth in the local school. The students had an opportunity to examine some of the risk and protective affecting factors community in terms of death by suicide. The following is an introduction to the problem of suicide among Aboriginal youth.

In 2000, suicide was the leading cause of death for Aboriginal youth and young adults (aged 10-44 years),

accounting for 38% of deaths. Young Aboriginal males are at a 5 fold greater risk of death by suicide, and female Aboriginal youth are at 7.5 times greater risk compared to their Canadian counterparts. This increased risk of death by suicide is thought to be due to the fact that Aboriginal youth face many more risk factors for than suicide the average Canadian. Risk factors such as social isolation, substance and alcohol abuse, unemployment, lack of personal purpose, access to firearms and negative living conditions are realities of life in remote Native communities. Family instability and histories of substance abuse, violence, depression and death suicide are the legacy of the residential schools' impact on Aboriginal parents.

Living conditions are extremely poor in many Northern reserves. Housing conditions are a major issue, with multi-generation families of up to 20 people sharing a single home. In many communities, safe drinking water must be purchased and brought home by snowmobile. Nutrition is poor due to the cost of flying in fresh produce. There are few iobs

opportunities for youth in such remote, isolated communities.

The most common mental disorders associated health with 80-100% of suicides are major depression and substance abuse, two risk factors particularly relevant to reserve life. Solvent abuse is a problem among the youth of this community and there are many initiatives in place to address this problem. school hallways are lined with posters drawn by students advocating the dangers of gas sniffing and solvent abuse. The "gas patrol", a dedicated group of community leaders, tour the community at night looking for youth sniffing gas and then walk them home in order to prevent further harm or freezing to death in the cold. Alcohol abuse is similarly a problem significant despite the fact that it is a dry reserve. Alcohol is smuggled into the community along the (Continued on page 2)

CONTENTS

Protective Factors And Sui	cide1
WRSPC Takes its Message	e to the
Internet	3
WHY?? Suicide and the	Older
Adult Resource	4
Creation of a Region	Wide
Suicide Prevention Strateg	y4
Upcoming Events	5

ice road in the winter and every vehicle entering the community is searched. Police officers and peacekeepers burn the confiscated alcohol and patrol the reserve at night to apprehend intoxicated individuals and impound them in order to prevent them from freezing or harming others. Despite such harm reduction there is little measures. counselling available for alcoholism victims of in isolated Northern communities. Confidentiality issues in such close-knit settings make people reluctant to seek what help is available. telehealth Recent developments allow confidential counselling with remote therapists, which could reduce negative attitudes towards seeking help. Nurses noted that patients were more comfortable talking to physician psychiatrist or through the telehealth equipment (a TV set and mounted camera) than talking face to face.

The community is building upon factors known to protect against death by suicide, particularly cultural enhancement. Cultural enhancement is preservation and reclamation of traditional skills, history, language, ceremonies, art, healing and religious practices. Researchers have identified six protective factors indicative of "cultural continuity": selfgovernment, education fire services. police and services, health services, cultural facilities and land

claims. Aboriginal communities with some form of self-government were found to have the lowest rates of death by suicide. community is largely selfgoverned by an elected chief and council, but was placed under third party management by the Department of Indian and Northern Affairs. Financial control of the band's funds was transferred to an outside agent based in Ontario. Southern This transfer of control can be a demoralizing blow community's autonomy and self-government.

The community has a high language retention rate as well as a high school on the reserve two cultural enhancement factors. Aboriginal language and culture classes are taught day by Aboriginal each paraprofessionals in school. High school teachers incorporate traditional culture into the Ontario curriculum. For example, high school students attend an Aboriginal leadership class that includes traditional medicine wheel teachings (mental, spiritual, physical and emotional aspects of health coming into balance) and explains the significance of traditional art and symbols. Specific culture classes teach students other traditional skills, and the high school also has a wood shop where students learn how to construct bed frames, sled runners and other relevant objects.

Recently, the community held a pow-wow, the first in the

community in years. The topics of suicide awareness and prevention and grieving after bereavement by suicide were addressed in the program, alongside traditional dance, music and celebration to engage the community. This is an indication of the cultural renewal that is taking place here. Such efforts for cultural enhancement serve to provide youth with a feeling of belonging, stronger cultural identity and a sense of security in their community. Pride in heritage and traditions and self-recognition as belonging to a distinct culture can act as a buffer against the risk factors of loss of cultural values and traditional beliefs marginalization of Aboriginal culture by some outsiders. Despite the powerful initiatives, community the faces significant challenges. Youth are inundated with images of the idealized Western lifestyle through widespread use of satellite TV and videogames.

The increased rate of death by suicide among Aboriginal youth deserves greater attention and is deeply concerning. Please consult the following references to learn more.

References:

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Special thanks to Region of Waterloo Public Health for their support in the printing and distribution of this newsletter.

WRSPC TAKES ITS MESSAGE TO THE INTERNET!

Cathy McDonald-Reis

We are pleased to announce that we officially own the address www.wrspc.ca! The Waterloo Region Suicide Prevention Council continues to grow and achieve its goals. We have hosted two successful annual conferences, created a Speakers' Bureau with outreach presentation on suicide prevention, developed another WHY? brochure in our

series, held three community events for the September 10, 2005 World Suicide Prevention Day...the list could go on and on! One of our goals for 2006 is to bring our messages about suicide and suicide prevention to the Internet through our own web site. We went on the hunt in the fall of 2005 to find a creative person who could not only guide us on how to begin, but also to assist us with the physical setup and ongoing maintenance of this project. Darcy Davis of D. Davis **Images** and Design (www.darcydavis.com) came to our rescue with more ambitious goals for timing that we had ever dreamt! several weeks, we officially set up www.wrspc.ca. Our logo is proudly displayed and we are gathering countless pieces of valuable information to include. Darcy has made a frightening very process appear seamless. He continues to "wow" us with his ideas and mock trials of what our site will look like.

The site will include links to all our current and future outreach brochures as well as newsletters (both current and past versions) which can be downloaded. It will include the most up to date statistics available to us about suicide. There will be a place to learn about our upcoming conference (which will be held in September of this year) and links to other sites that provide and education information about suicide prevention and mental health issues. We have

also partnered with the Waterloo Region Suicide Prevention Strategy Planning Group and will include a downloadable version of the recently completed suicide prevention strategy for Waterloo Region on our site.

The Waterloo Region Suicide Prevention Council and the web site do not provide crisis However, the web services. site will include a link to resources in order to access crisis services in your area. All material provided on our web site is intended for informational and educational purposes only. This information is not meant as a substitute for qualified advice. professional We recommend that you seek health information or crisis services from a health care provider, crisis service or your local hospital.

We look forward to continuing our work with Darcy in hope that our site can be up and fully functioning by Spring 2006. Until then, while you are surfing on the net, go to www.wrspc.ca, and bookmark us!!!

Waterloo Region Suicide Prevention Newsletter

is published for the prevention of suicide through education, networking and resources.

Waterloo Region Suicide Prevention Council c/o Canadian Mental Health Association 67 King St. E.

Kitchener ON N2G 2K4 519-744-7645 Ext. 310

WHY?? SUICIDE AND THE OLDER ADULT RESOURCE

The Waterloo Region Suicide Prevention Council has developed a new pamphlet that deals with the subject of suicide among older adults. Statistics show that elderly people, especially males, have suicide rates that are higher than those among teens and among the population as a whole.

Increasing age, living alone and increasing health problems are some of the risk factors for suicide among older persons.

"WHY?? Suicide and the Older Adult" outlines risk factors and warning signs, and offers information on helping yourself or others. As well, the pamphlet has a list of telephone numbers and websites that people can use in order to get help or to learn more about this issue. The pamphlets will be distributed to physicians, senior centres and nursing homes though out the Region.

For more information, or to request a pamphlet, please call 519-744-7645 Ext.310 and leave a message.



We would like to welcome
Dr. Johan Reis
To the Waterloo Region
Suicide Prevention Council

CREATION OF A REGION WIDE SUICIDE PREVENTION STRATEGY

Linda Bender

The Waterloo Region Suicide Prevention Planning Group was formed in response to the recommendations of the 2002 Coroner's inquest. This group is a broad-based partnership of human service organizations in Organizations our region. involved were: Cambridge Memorial Hospital, Canadian Mental Health Association-Waterloo Regional Branch, Catholic Family Counselling Centre. Community Access Centre of Waterloo Region, Conestoga College, Grand River Hospital, Lutherwood, Mental Health and Wellness Network. Regional Municipality Waterloo (including Public Health), St. Mary's General Hospital, University Waterloo, Waterloo Catholic District School Board. Waterloo Region District School Board. Waterloo Suicide Region Prevention Council, Waterloo Regional Homes for Mental Health. Waterloo Regional Police, and Wilfrid Laurier University.

Coming together over a period of 6 months, the group completed the following tasks:

- developed Terms of Reference
- adopted Guiding Principles
- developed an outline of mental health services in Waterloo Region as

- background/context for the strategy
- developed the Waterloo Region Suicide Prevention Strategy.

The strategy consists of five goals, and the steps to work towards each goal:

- 1. Commitment: To increase community commitment to participation in a regional suicide prevention strategy.
- 2. Public Awareness: To increase awareness that suicide is a significant health problem in our community and that it is preventable through community action.
- 3. Prevention: To work together/collaborate to increase community capacity to identify and assist people in all aspects of suicide prevention.
- 4. Training and Education: To increase the capacity of the community to respond to the risk factors of suicide.
- 5. Advocacy: To influence community change to implement a coordinated suicide strategy.

Overall, the aim of the strategy is to address all levels of suicide prevention activities:

- Promotion: actions aimed at promoting general awareness.
- Prevention: actions with the goal of assisting individuals in pre-crisis situations, helping them steer away from a specific suicidal behaviour.
- Intervention: actions directed at individuals in crisis, helping them overcome the crisis or

(Continued on page 5)

- minimize its harm effects.
- Postvention: actions directed to individuals in post-crisis situations, helping them recover from the effects of suicidal behaviour in themselves or others they are associated with.

Next steps will see organizations identify which steps in the strategy may fit mandate, skills and their capabilities, and creating a plan for moving ahead on implementing the strategy in our community. It is very exciting to see community members take ownership and action towards making suicide prevention everybody's business!

UPCOMING EVENTS:

Good to Know...

During Mental Health Week, the Waterloo Catholic District School Board's 5 high schools will be partnering with CAIP (Child and Adolescent Inpatient Psychiatric Unit) of Grand River Hospital. High administrators. school guidance staff and child and youth workers will learn about the CAIP team, the process for admission, day programming for students and how the two groups can work together to provide services to students with mental health issues who will be returning to school after a hospital admission. CAIP will be presenting two "lunch and learn" sessions at St. Mary's High School.

Mental Health Week May 1–7, 2006

Take control of your health;
Take care of your mind
is the national campaign
slogan for Mental Health
Week.

"Take time to live, laugh, & play!"

is how we describe the celebrations in Waterloo Region – free of charge. Everyone is welcome!

"THE GROOVY GIG"

Performances of original poetry, songs, comedy and thoughts

Groovy snacks and cool ideas on taking time for fun Journal Writing Workshop Music making and games

Wednesday, May 3, 2006 12:30 P.M. – 4:00 P.M. Centre for Mental Health 67 King Street East Kitchener, ON

For more information call 519-744-7645 Ext. 333

"CAMBRIDGE COMES OUT TO PLAY"...

Playful things to do, eat, drink & create

Live entertainment Display of original community pictures created by your neighbours and friends

Thursday, May 4, 2006 6:30 P.M. – 8:00 P.M. Cambridge Centre for the Arts

David Durward Centre Cafeteria

45 Thorne Street, Cambridge For more information call 519-740-7782

Building on last year's campaign theme *Practise Mind and Body Fitness*, this year's goals include:

- enabling Canadians to sustain good mental health and mental fitness
- helping Canadians respond effectively to and manage, stressful events and situations in their lives.

Celebrating Mental Health Week can encourage people to:

- learn the characteristics of good mental health and find out how mentally healthy they are
- improve the way they respond to and manage positive and negative life events/situations (including change, illness mental or physical, etc.).

Attending to our mental health has many dimensions:

- being mentally healthy leads to better overall enjoyment of life
- it is better to focus on changing what we can, and dealing more effectively with what we cannot change
- the way we manage stressful events/situations in our lives can impact our overall health (mental and physical).



If you would like your name deleted from the Waterloo Region Suicide Prevention Council mailing list please leave a message at 519-744-7645 Ext. 310.

The WATERLOO REGION SUICIDE PREVENTION COUNCIL Presents:

Free Community Forum – From Survivor Grieving to Survivor Giving

Thursday, September 14, 2006 5:30 P.M.

The Sunshine Centre Luther Village on the Park 141 Father David Bauer Drive Waterloo ON

Guest Speaker: Bonnie Ball

Dimensions of Suicide Third Annual Conference

Understanding and Hope

Friday, September 15, 2006 The Sunshine Centre Luther Village on the Park 141 Father David Bauer Dr. Waterloo ON

Presenters:

Dr. Antoon A. Leenaars Suicide: A Multidimensional Malaise

Bonnie Ball The Canadian Perspective of Suicide

Kathy Payette/Wayne Hobbs Our Hopes – Our Strategy

For further information contact:

Kathy Payette 519-886

Kathy Payette 519-884-1470 Ext.153

CANADIAN ASSOCIATION FOR SUICIDE PREVENTION (CASP) Conference 2006

Complexity of Suicide: Prevention, Intervention and Aftermath

October 25 – 27, 2006 University of Toronto Conference Centre 90 Chestnut St. Toronto ON

For more information, go to www.suicideprevention.ca.



WE NEED YOUR SUPPORT.
YOUR DONATIONS ARE
NEEDED!
SUPPORT THE WORK OF
THE WRSPC
BOTH INDIVIDUAL AND
ORGANIZATIONAL
DONATIONS ARE
WELCOME.
PLEASE FORWARD YOUR
DONATION TO:

Waterloo Region Suicide Prevention Council c/o Canadian Mental Health Association 67 King Street East Kitchener ON N2G 2K4





CANDLES

Please help support the Waterloo Region Suicide Prevention Council by purchasing beautiful candles for your enjoyment. A set of 3-6" pillars on a glass plate in

four different scents for only \$15.00. To order, call 519-744-7645 Ext. 310 and leave a message.

RESOURCES AVAILABLE THROUGH WRSPC

Waterloo Region Suicide Prevention Council Brochure

WHY?? Suicide Information Brochure

WHY?? Youth Suicide Brochure

WHY?? Suicide in the Older Adult Brochure

Suicide Risk Assessment and Intervention for Caregivers Booklet

Waterloo Region Suicide Prevention Council Newsletter published twice yearly

Suicide bookmark (available until supplies run out)



