Background Literature

Commentaries

Aboriginal


This article is a non-academic piece on the current ASSIST Program in Manitoba and its successes. The engagement of youth in the prevention and awareness of Aboriginal youth suicide through a gateway program. Although the article did not note a formal evaluation, it did mention the live experiences of the youth and the anecdotal evidence of success.


This was another commentary on the status of Aboriginal health, assimilation, and stress phenomenon of involuntary cultural change. Bartlett suggests that forced acculturation of Aboriginal peoples has resulted in a creation of health issues for this population due to “stress phenomenon” and related “social and psychological pathology”. Colonization impact on Aboriginal peoples in Canada have produced conditions of extreme stress for multiple generations. The article urges for additional understanding the pathogenesis of stress phenomenon which may prove useful in the development of cultural approaches as the western programs that have not proven very successful.

Canadian

Spiwak, Rae; Elias, Brenda; Bolton, James; Martens, Patricia; Sareen, Jitender (2012) “Suicide Policy in Canada: Lesson from History” Canadian Journal of Public Health Volume 103

This is a commentary piece on the state of policy related to national suicide prevention policy or the lack of a national strategy in this area. The short commentary provides a history of suicide and the 1972 decriminalization of suicide. In addition, the article provides a basic understanding of federalism in Canada as one of the barriers of producing a national strategy as the provincial government are responsible for health and health related issues.

The article calls for a national strategy and additional research and evaluation of prevention, postvention and intervention models; involving clinicians in the research and development of policy.


This is a commentary piece on suicide in Canada and slight decline over time and change of methods used in the suicide (i.e. suicide is on the decline; however for young women on the rise, less use of gun but more methods of suffocation). The article does mention that studying Aboriginal communities with lower rates of suicide is important and necessary as other communities will be able to learn the best practices in prevention.

This article provides background to support the need for a national suicide prevention strategy in Canada. The author calls on support for a national strategy stating that the current fragmented services and lack of coordination with non-mental health supports require a national strategy. Some provinces have provincial strategies; however Ontario and Saskatchewan have no plan on suicide prevention.

Systematic Reviews
Prevention, intervention and Post-vention


This report gathered systematic reviews and evaluations of suicide prevention, post-vention and intervention programs. Based on the review the report determined that suicide prevention strategies be developed and implemented in ways that build on strengths, resilience and protective factors; integration and coordination across sectors and jurisdictions of stakeholders and programs is important in preventing suicide; the provision of education and training is key to suicide prevention.

Kirmayer, Laurence; Fraser, Sarah-Louise; Fauras, Virginia; Whitley, Rob (2009) “Current Approaches to Aboriginal Youth Suicide Prevention” CMHRU Working Paper 14 from Culture & Mental Health Research Unit – Institute of Community & Family Psychiatry – Jewish General Hospital – Montreal Quebec

This was an extensive review of suicide prevention, intervention and post-vention approaches for aboriginal youth suicide. The report reflected on the number of reports, evaluations, and academic research on suicide and provided recommendations for a number of best practices and approaches for community based programs. The report highlights the promising practices of existing suicide prevention programs. This is an important report for communities to understand prior to coordinating and delivering suicide prevention, intervention or post-vention programs.

Prevention


Clifford et al identified nine community based suicide prevention program evaluations to determine the success models and lessons learned. This review of the evaluations, was systematic and determined that there is insufficient evidence to determine which intervention strategies were most effective for preventing suicide due to methodology limitations. In addition, the article recommends that an increase in government, research and community partnerships to assist in rigorous evaluation methods would be
helpful because without these methods, creating effective tools and programmatic responses to suicide will be limited.

Intervention


This article reviewed 16 evaluations of post-vention programs for their effectiveness on suicide attempts, grief symptoms, mental distress and mental health broadly. This systematic review also sought to review the cost effectiveness of the programs. Due to limited information on cost effectiveness of bereavement or suicide prevention programs, the study was unable to determine the cost effectiveness of the programs. The review of the post-vention programs (school based, family based and community based) did not provide sufficient evidence that the programs reduced suicide, suicide attempts or suicide contagion.

Although there were promising factors found in gatekeeper programs and family based programs, the study recommended the following: 1) post-vention programming should incorporate methodologically sound evaluations 2) study gatekeeper programming to determine its effectiveness 3) active post-vention programs for families should be investigated for its’ effectiveness and 4) group base counselling should be studied to determine its effectiveness.

Government Reports


This is an older document from around 2002. The advisory group provided a series of recommendations related to suicide related to First Nation youth. As a result of their deliberations, research and priorities, four themes were developed: (1) the need for an evidence-based approach; (2) the need for effective and integrated health care; (3) the importance of community driven approaches; and (4) an emphasis on strengthening identity, resilience and culture. Many of the recommendations urged for government action in this area.

Post-vention

Barlow, Constance; Waegemakers Schiff, Jeannette; Chugh, Urmil; Rawlinson, Dixie; Hides, Elizabeth; Leith, Judy (2010) “An Evaluation of a Suicide Bereavement Peer Support Program” Death Studies Volume 34. Downloadable at http://dx.doi.org/10.1080/07481181003761435

This was an evaluation of the post-vention program aimed at the survivors. The program was a suicide bereavement peer support program and sought to assist survivors through the grieving process in a peer support therapy type program. This program is open to all ethnicities and found in Calgary. The
evaluation assessed the impact of the program and results indicated that the program did result in short-term positive outcomes of the clients and peer mentors.

It is important to note that the structure of this program was in connection to the already existing individual assistance / counseling offered at the organization and the sampling of the participants and peer mentors was quite low.


This research paper provided context to post-vention programming and suicide survivor statistics. Clearly, post-vention programs are needed for survivors due to their vulnerability after the loss of a loved one; the research provides three types of programming that has been used to date: survivor group therapy, individual therapy and active post-vention programs. The recommendations from the research is to continue to offer survivor group therapy and individual therapy; however states should be increasing their efforts in active post-vention programming. This will require increased coordination between emergency services and mental health services along. In addition, all post-vention type programing requires further research and evaluation on its effectiveness.

Conference Proceedings


The article refers to conference proceedings at the National Aboriginal Heath Association Conference in Ottawa during November 2010. Noted in the article was a speech was from Natan Odeb, Director of Social and Cultural Development for Nunavut Tunngavik Incorporated in which he provided a new look at suicide prevention; where programs developed to promote wellness and community development should not be championed as suicide prevention programs. In addition, he states that Aboriginal people need to come to terms with “the fact that our kids are growing up in a dysfunctional state” and although this is difficult to talk about, we must discuss these issues. James Makokis, medical student also noted that a return to cultural and spiritual practices is important to social determinates of health.

Suicide Prevention Programs

Sareen, Jitender; Isaak, Corinne; Bolten, Shay-Lee; Enns, Murray; Elias, Brenda; Deane, Frank; Munro, Garry; Stein, Murray; Chateau, Dan; Gould, Madelyn; Katz, Laurence (2013). “Gatekeeper training for suicide prevention in First Nations community members: a randomized controlled trial” Depression and Anxiety. Volume 00

This study aimed at evaluating the impact of gatekeeper training in a First Nation community in northern Manitoba. This was a randomized controlled trial with 96 participants over an 11 month period. Part of the participants received gatekeeper training and the other portion completed a two day retreat
focusing on culture. The results of the study concluded the following: 1) there was limited impact of gatekeeper training for First Nation communities with high rates of suicide and 2) continued evaluation of the impact of gatekeeper training should be completed in the future. It is possible that the two day retreat may have had a stronger impact in reducing suicide ideation or suicide then the gatekeeper training.

Fountoulakis, Konstantinos; Gonda, Xenia; Rihmer, Zoltan (2011) “Suicide prevention program through community intervention” Journal of Affective Disorders 2011. Volume 130

This systematic review, observed and studied 49 evaluations of community based suicide prevention programming globally. The aim of many of the community based programming was to reach those at risk and who are outside the scope of healthcare. The conclusion of the review determined that many of the evaluations reported positive outcome in increasing knowledge and awareness of suicide; however the authors noted that the positive outcome were at the “theoretical-intellectual level” and the programs did not provide evidence of reduction in suicide or attempts of suicide. The article urged for additional research in this area as many of the current studies were opinion pieces and not “reviews”.

The report noted that long term, multi-level community interventions through networks are an effective means to reduce suicide. Current pharmacological and psychosocial treatments are inadequately administered and psychoeducational programs like gatekeeper training fail to reach targeted groups and the groups most at risk.


This study reflected the community based participatory research of a suicide prevention program. The program provided sensory integration, a form of occupational therapy, to school aged Indigenous children to determine its effect. The result indicated that the occupational therapy provided a positive impact on the children in their immediate feelings after the sensory activity. Sensory integration therapy can provide people with positive stress management. This study wasn’t longitudinal and only showed the immediate feelings of the children.


This report focused on describing the anecdotal evidence of success within an Aboriginal peer support, gateway program in Kimberly, Australia. This program focused on Aboriginal young men and provided a safe space to heal from suicide while teaching youth about the signs and prevention techniques and operates as a gateway program. The local sport team has been the leading charge in this initiative and it’s important to note that the community is in full support of this model.

Allen, James; Mohatt, Gerald; Ching Ting Fok, Carlotta; Henry, David; People Awakening Team (2009) “Suicide prevention as a community development process: understanding circumpolar youth suicide prevention through community level outcomes” International Journal of Circumpolar Health. Volume 68. 2009
This research sought to determine how effective a community based suicide prevention program was in a northern Indigenous community. This program utilized cultural preservation, increasing protective factors in the community, and community development initiatives targeting suicide and alcohol abuse. The research took place over a year and found the following: Community readiness regarding prevention efforts increased, a trend in the data suggests community protective factors increased in adult protective factors and in the perceptions of youth.

Cousins, Bradley; Descent, Danielle; Kinney, Michelle; Moore, Meredith; Pruden, Jose; Sanderson, Kim; Wood, Isabelle. (2010) National Aboriginal Youth Suicide Prevention Strategy: Multiple Case Study of Community Initiatives. Centre for Research on Educational and Community Services

This report is a case study of four of the 200 programs funded under the National Aboriginal Youth Suicide Prevention Strategy (NAYSPS). This was not a formal evaluation of NAYSPS; however the case studies reviewed 1) the impact of the programs to youth and the community and 2) the strengths and weaknesses in implementation of the programs.

The case study found the following: the need for additional research and research tools; early success relies on youth engagement, community support, leadership and contextual information; policy areas regarding the program address capacity and resourcing, partnership, training for both workers and broad-based.

Chouinard, Jill Anne; Moreau, Katherine; Parris, Sandra; Cousins, Bradley (2010) Special Study of the National Aboriginal Suicide Prevention Strategy. Centre for Research on Educational and Community Services. March 2010

This document was a special study designed to investigate the progress of the program and is not an evaluation. Based on the review of internal files, key informant interviews and questionnaires, the findings brought light into the needs of the program such as additional research on suicide prevention programs, culturally relevant tools, capacity building, surveillance data, evaluation dollars, and innovative tools. Due to the timing of the research, determining the success of the program was limited and challenging. Communities are struggling with stigma and low communication of the issue, jurisdictional issues, and a wide variety of programming in each community.

Suicide Intervention Programs


This research article reviewed the impact of an intervention approach related to self-harm behaviour and suicide which included a suicide risk assessment, individual, group and family therapy. The study explored the youth participant experiences of this model. As a result of the small number of participants in this study, the results are limited. The authors stressed the importance of a continuum of services, full and comprehensive suicide risk assessment shortly after the referral, understanding of the adolescents world and work view. The themes from the youth pertain to creating a connection, active
listening, understand youth in their context (their world view, challenges, history, family issues, etc.) and finally recognition of the strengths of the youth.

Suicide Factors of Aboriginal people


Although this report was written in 1994, many of the statements and trends related to Aboriginal suicide ring true to current reports and findings. This paper provides epidemiology information; factors effecting suicide, protective factors, and suggestions for community based programmatic responses and urgency for government support.

This paper has been cited in many of the papers that followed it and the findings, suggestions and theories to improve the situation for Aboriginal youth in this area remain.

Ames, Megan; Rawana, Jennine; Gentile, Petrice; Morgan, Ashley (2013) “The Protective Role of Optimism and Self-Esteem on Depressive Symptoms Pathways Among Canadian Aboriginal Youth” Journal of Youth Adolescence September 18, 2013

This research study focused on urban Aboriginal youth and the correlation between optimism and self-esteem to depression. The paper utilized data from the National Longitudinal Survey of Children and Youth. The results indicate that high self-esteem and an optimistic outlook are protective factors for depressive symptoms in early adolescent Aboriginal youth. The current study identified the depressive symptoms trajectory of Aboriginal youth and investigated the role of two key protective factors (i.e., self-esteem and optimism) in the relationship between alcohol use and depressive symptoms. Further research is needed to determine the most effective ways of fostering the development of self-esteem and optimism and protecting against engagement in alcohol use and the development of depressive symptoms.


In this study, the use of PRECEDE was used to understand suicide among Indigenous adolescents. The PRECEDE model utilized “the quality of life” as a precursor to understanding health issues, this combined with epidemiology, environment, behaviour, education and administrative factors all have to be taken into account before suggestions on solutions can be identified. This review provided a glimpse into the factors associated with indigenous suicide among adolescents.

The findings suggest that interventions are more likely to be successful if they are community based and initiated by the community. The social environment affecting Indigenous youth is important underlying factor regarding suicide. In addition, the negative economic aspects affecting Indigenous populations combined with cultural disintegration negatively affect families and self-worth. There are many factors that affect Indigenous suicide; such as undermining of culture, in addition to negative physical, social and economic environments with few positive outcomes.

This article introduces a theoretical framework regarding self-determination, culture and suicide prevention. The framework suggests decolonization, or increase in self-determination will result in lower suicide rates for Indigenous populations. As Indigenous communities engage in cultural activities and increase their self-determination, healing will be restored. Research on this theoretical framework is important as Maori are beginning to assert themselves and self-determination activities are beginning; therefore providing empirical evidence of this theory will be important for Indigenous psychology.


This research examined the effects of imitation within clusters of suicide in Indigenous communities and largely supports a contagion effect operating. This suicide contagion effect can result in suicide clusters and echo clusters, and are a result of many social determinants of suicide. The study states that Indigenous suicide is strongly connected with socio-economic deficiency, the social determinants of Indigenous health and wellbeing and geographic remoteness. A potential effective response to suicide clusters requires broader policies, consistent strategies, collaboration and social changes to address the root causes of economic stress, hardship, vulnerability, family and community dysfunction and disintegration; these programs and initiatives should be culturally and spiritually sensitive and appropriate.

Potential Long Term Solutions


This research focused on policy approaches to improving social conditions of Aboriginal youth that would result in less suicide. The study focused on research of the social conditions faced in the northern communities and specifically social conditions effecting Aboriginal youth and connecting the conditions to suicide amongst the population. Based on the community research and academic studies, the authors have suggested policy options that would provide refle to the community in a number of areas and in the long term reduce suicide among the Aboriginal youth population. These policy changes are 1) Aboriginal child welfare 2) Aboriginal justice initiatives and 3) improved housing conditions.

This study was based on research dedicated to rural suicide issues in Canada and China. Based on the academic research that has taken place with the rural community in both countries, a matrix was developed to assist in suicide prevention models for rural communities. The model and examples of programs that are successful in rural communities are based on evidence; while flexible for communities with varying cultural and socio-economic conditions. The matrix also includes the types of evaluation tools that would suit the programmatic area. Limitations include little or no research that validates the model.

Community, Wellness and Cultural Programs


This report provided a qualitative evaluation of a community led program to increase culture and prevent social problems within a First Nation community in Quebec. The program offered traditional activities for First Nation adolescent males over a period of six weeks in a wilderness setting. Results of the study determined that the activities increased cultural pride, fostered pro-social behavior and empowered First Nation youth. There were some limitations to the study such as the methods or tools used to capture specific outcomes, limited participation and no control group.


The article utilizes the seven teachings and relates the knowledge to healing as it pertains to addictions, family violence, etc.; “wise practices” look to the past and contain cultural knowledge that is important to healing our communities. Indigenous worldview and wisdom in the recovery process is underutilized. The seven teaching as a framework for re-building a healthy social construct and worldview can be important in the development of social and emotional utility and has great potential for addressing violence, mental illness and addictions.


The article describes the recent developments in Ontario First Nations that seek to improve the wellness of northern Indigenous communities through partnerships. Mamow Sha-way-gi-kay-win is a unique partnership between north and south, aboriginal and non-Aboriginal and between First Nations. This partnership builds trust and respect between each community that focuses on healing, facilitation of
resource exchange and development. These partnerships are long term and seek long term solutions to increase wellbeing and decrease suicide.

McShane, Kelly; Smylie, Janet; Hastings, Paul; Prince, Conrad; Tungasuvvingat Inuit Family Health Team; Siedule, Connie (2013) “Evaluation of the acceptability of a CD-Rom as a health promotion tool for Inuit in Ottawa” International Journal of Circumpolar Health Volume 72. Downloadable at http://dx.doi.org/10.3402/ijch.v72i0.20573

This was a research project that injected technology as a tool for sharing health information. The research was aimed for urban Inuit in Ottawa and provided prenatal health information in both Inuit and English. The results of the evaluation of the tool indicated that the medium was positive and knowledge was gained after the viewing. Additional research is needed to assess the longer term effects.

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