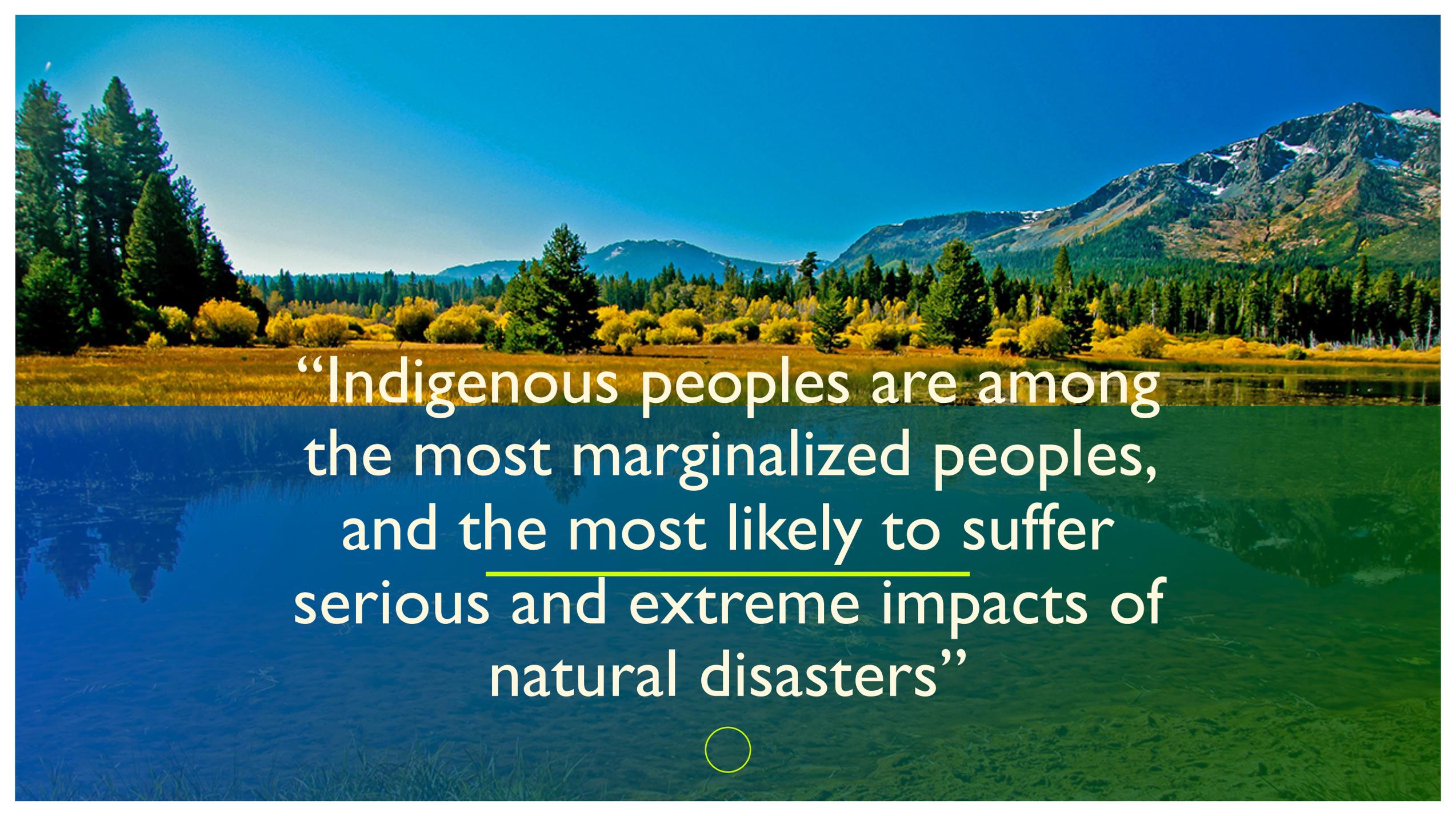




Climate Change, Emergency Management and Mental Wellness

A Discussion

A scenic landscape featuring a calm lake in the foreground, a dense forest of evergreen and deciduous trees in the middle ground, and snow-capped mountains in the background under a clear blue sky. The text is overlaid on the lower half of the image.

“Indigenous peoples are among
the most marginalized peoples,
and the most likely to suffer
serious and extreme impacts of
natural disasters”



Understanding Disaster in the Context of Indigenous People

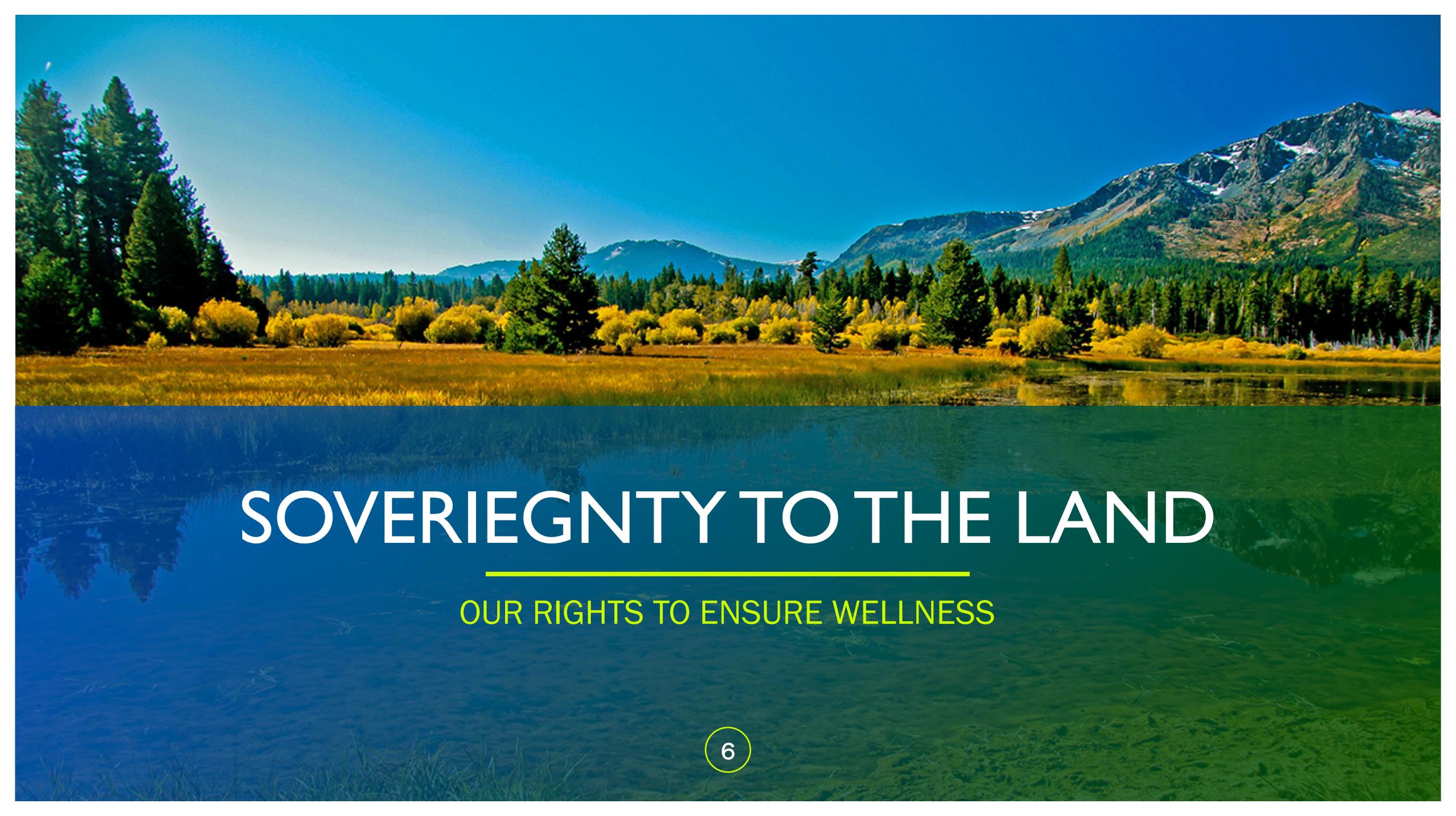
ADD A FOOTER

- Indigenous people are more vulnerable to the impacts of disasters (Ellemore, 2005; Howitt et al, 2014; Lambert et al, 2014)
- Indigenous people have longer history of exposure to, and impacts from climate change and natural disasters
- Historical acts of colonization and ongoing acts of oppression must be viewed as disasters for Indigenous people (Stewart-Harawira, 2005)
- The effects are far-reaching, on mental and physical health, on harvesting rights, on food security, on education, and are particularly devastating for young people, elders and women,



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- The perception of natural and man made disaster for Indigenous people often extends further back then when a natural and man made disaster is identified with impacts that last much longer than the response
 - Although Indigenous Knowledge is acknowledged it remains marginalized and we struggle for its acceptance and ethical engagement





SOVERIEGNTY TO THE LAND

OUR RIGHTS TO ENSURE WELLNESS

United Declaration on the Rights of Indigenous People

UNDRIP provides a clear message on sovereignty to land and knowledge

- Self-determination
 - Free, prior informed consent
 - Participation in decision making
 - Determine and develop priorities and strategies
- Connection to land
 - Protect and conserve the land
 - Not to be forcibly removed from their land without full, prior informed consent
- Maintain and protect Indigenous Knowledge (IK) and manifestations of their evidence



Global Frameworks

- Hyogo Framework for Action (HFA)
 - Recognizes IK and cultural heritage but nothing specific on Indigenous People
- United Nation International Strategy for Disaster Reduction (UNISDR)
 - Work collaboratively between key players including Indigenous People
 - Full and active participation of Indigenous People



Placing Indigenous Rights into Disaster Risk Management

- *Necessity* for Indigenous people to have a voice in contributing to risk practices to reduce disaster risk and vulnerability
- Imposing centralized solutions to local problems threatens a community's capacity to address risk and save lives
- Must acknowledge that risk includes impacts to historical and current colonial practices

Indigenous People Role in Protecting the Land

- Regional Platform for Disaster Risk Reduction in the Americas in 2017 recognizes the role of Indigenous people in addressing disaster risk
- Indigenous people safeguard 80% of the world's remaining biodiversity
- Hold vital ancestral knowledge and expertise on how to adapt, mitigate, and reduce risks from climate change and disasters.



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- Shortfalls in infrastructure make Indigenous communities vulnerable to managing disaster and emergency responses
 - Addressing infrastructure deficits not enough and MUST include use of IK and traditional technologies in collaborative efforts to address disaster
 - Environmental protection to curbing disaster risk

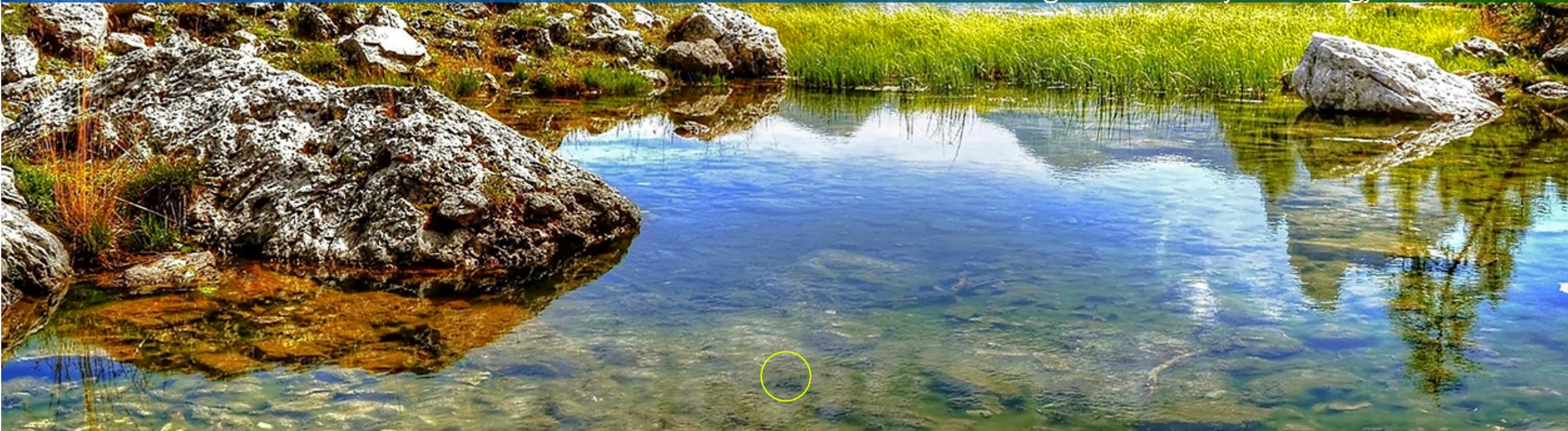




Mental Wellness Impacts to Environmental Changes

Collective Trauma Impacts as a Result of Disaster

- PTSD & anxiety disorder more likely
- Decline in social relations
- Decline in subsistence production and distribution activities
- Perceived increase in the amount of and problems with addictions and domestic violence
- Undermine Indigenous identity & ideology



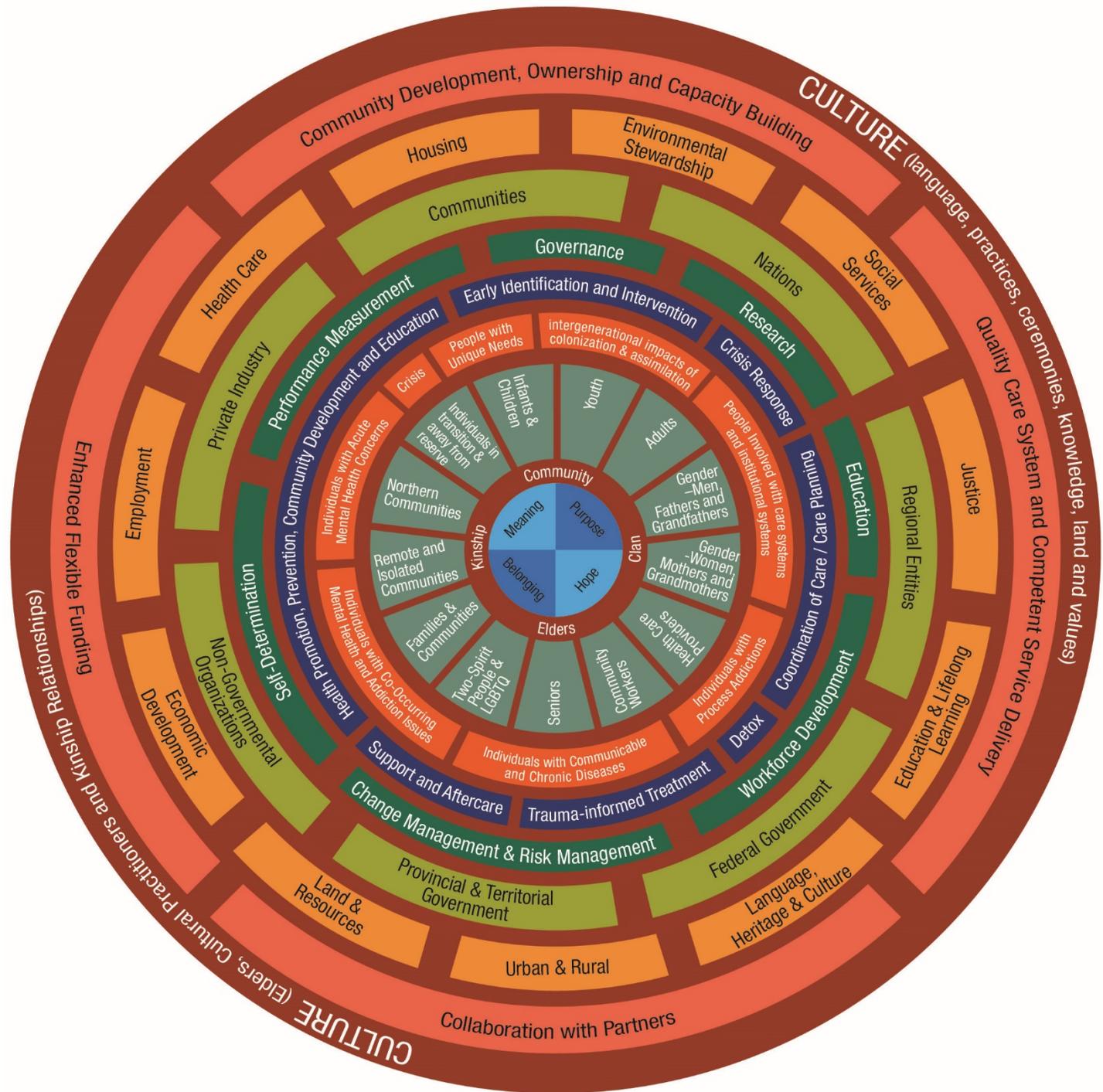
Community Impacts

- Collective trauma can modify social dynamics, processes, structures and functioning:
 - ✓ **COMMUNITY LEVEL CHANGES:** erosion of basic trust, silence, deterioration in social norms, morals and values and poor leadership
 - ✓ **COMMUNITY IMPACTS:** unconcealed alcohol and drug misuse among community members; lack of cultural opportunities including transmission of language skills, history, traditional values and spirituality; unwillingness to reclaim community members; low levels of capitalism such as trust, reciprocal helping relations and social engagement
 - ✓ **NATION IMPACTS:** popularization of negative stereotypes, social policies that perpetuate colonization of Indigenous peoples, lack of support for holistic programs and services targeting Aboriginal needs, and lack of support for community and, lack of support for community self-determination



First Nation Mental Wellness Continuum Framework

ADD A FOOTER



Framework Overview

- Developed by the AFN, FNIHB, TPF & FPWC, the First Nations Mental Wellness Continuum Framework is a shared vision for First Nations Mental Wellness
- Outlines a coordinated, holistic approach to MW programming that takes into account the important role of FN culture, traditions, and language:
 - Links mental and physical health and wellness
 - Is a component of the broader continuum of health programs and services, and social determinants of health
 - Builds on innovation in communities
 - Outlines continuum of programs and services aligned with the population health model, linking with public health and primary care

Applying the Framework: Conceptual Shifts

Program focus on deficits

Evidence that excludes
Indigenous worldview, values, culture

Focus on inputs for individuals

Uncoordinated, fragmented
programs and services

Communities working within
program silo restrictions

Program focus on health and illness

Discovery of strengths

Indigenous worldview, values, and culture that are the foundation to determine the relevance and acceptability of various sources of evidence in a community context

Focus on outcomes for individuals, families and communities;
holistic collaborative approaches

Comprehensive planning and integrated federal/provincial/territorial/
sub-regional/First Nations models for funding and service delivery

Communities adapt, optimize and realign their mental wellness programs and
services based on their priorities

Approaches that strengthen multi-sectoral links, connecting health programs
and social services, across provincial/territorial and federal systems to support
integrated case management taking into account the First Nations social
determinants of health

The Framework and Emergency Management

- FN communities have identified natural disasters as a crisis to land that creates trauma for families and community
- Some have linked the emergency management and crisis response plans as both are recognized to impact wellness
- Interconnection of the SDOH all play a role in addressing natural (and man made) disasters and climate change



Land and Wellbeing

- Indigenous SDOH includes land & resources and environmental stewardship as important facets of mental wellness for First Nations
- Ties to the natural environment has been seen as being connected to positive health (NCCAH, 2013)
- Large percentage still collect food off the land
- Dumont has noted that connection to land is tied to strong sense of identity
- Land based activities reconnect to identity, transmitting language and knowledge and alleviating physical and mental stress (NCCAH, 2012)



Cultural Connections

- Research with the Quebec Cree have found that people who report good relationships in the community and spend more time in the bush are associated with less distress (Tanner, 1993)



How The Framework Can Support Wellness

- The Framework can:
 - Recognize cultural knowledge, evidence, practices and values as critical to addressing disasters as a result of climate change
 - The need for community defined plans that support outcomes for families using local, ecological Indigenous knowledge
 - Identify strategies to support wellness during EM (access to traditional foods, connection to family, access to cultural practices)
 - Establish culturally safe practices during EM
 - Establish a system of care that is seamless and competent in supporting those who are dislocated from their traditional lands
 - Support the need for collaboration among partners across jurisdictions and SDOH

