



Land-Based Intervention: a Qualitative Study of the Knowledge and Practices Associated with One Approach to Mental Health in a Cree Community

Russ Walsh¹ · David Danto²  · Jocelyn Sommerfeld²

Published online: 4 October 2018
© The Author(s) 2018

Abstract

This project is a qualitative study of a land-based intervention used in an Indigenous community in northern Ontario. As previous research suggests, a sense of connection to the land is an integral part of Indigenous well-being, and mental health interventions centered around this connection may be more appropriate for use in Indigenous communities than Western treatment approaches that typically emphasize individuality. The present study gains further insight into how a land-based intervention can be applied to an Indigenous community. Interviews with three community members were conducted and summarized in order to understand their views on the background, components, advantages, and challenges of the program. Results showed a focus on strengthening cultural identity, facilitating intergenerational knowledge transfer, and building relationships with others, similar to other land-based programs across Canada. The importance of reconnecting Indigenous youth with their cultural heritage and developing community-centered programs are discussed.

Keywords Indigenous · Aboriginal · Mental health · Psychology · Psychotherapy · Healing · Land based · Treatment · Intervention · Intergenerational trauma · Canada · Decolonizing research · Well-being · Qualitative · Phenomenology

The goal of the present study was to contribute to a deeper understanding of a land-based intervention within an Indigenous community in northern Ontario. A recent qualitative study by Danto and Walsh (2017) explored the comparative resilience of one James and Hudson Bay community, which despite a shared history of trauma and oppression with the other five Cree communities in this area, had been reported to have markedly lower rates of mental health services utilization and suicide. Interviews with community leaders and mental health services providers were conducted and analyzed in order to identify the features that distinguished this

✉ David Danto
david.danto@guelphhumber.ca

¹ Duquesne University, Pittsburgh, PA 15282, USA

² University of Guelph-Humber, Etobicoke, Canada

community. Participant responses emphasized the importance of cultural continuity and an overall sense of ethnocultural identity.

The most notable finding in this prior study was the ways in which connection to the land was interwoven throughout all responses. Participants' comments regarding physical, spiritual, mental, and emotional health often referred to attitudes and practices that affirmed a fundamental connection to their land. This connection informed individual and community efforts to maintain well-being (such as regular hunting trips and the acculturation of young people in this regard), and also seemed to provide a bridge between different spiritual beliefs (that is, whether participants characterized themselves as Christian or traditional, they saw the land as foundational to their faith). Related to this was the almost universal concern for "challenges" that entailed some form of disconnect from the land (e.g., relying on store-bought food rather than hunted food, as well as the increasing role of television and video gaming in the lives of young people). This may hold implications for health and healing initiatives both within and beyond this community. If a sense of connection to the land is a central feature of well-being, then it may need to be a central feature of mental health interventions.

It has been argued that conventional Western approaches to mental health are incompatible with the beliefs and practices of many Indigenous people (Kirmayer et al. 2000; McCormick 2009). On the other hand, a growing body of research suggests that forms of mental health treatment considered alternative from a Western perspective, including traditional healing and land-based programs, have had positive effects on mental health within Indigenous communities (Dobson and Brazzoni 2016; Gone 2013; Kirmayer et al. 2003). There are likely several reasons for these findings. As discussed by Wildcat et al. (2014), "if colonization is fundamentally about dispossessing Indigenous peoples from their land, decolonization must involve forms of education that reconnect Indigenous peoples to land and the social relations, knowledges and languages that arise from the land" [Abstract]. Indeed, colonization is well known to have disconnected Indigenous peoples from their cultural histories. Chandler and Lalonde's (1998) widely cited research on the topic of cultural continuity addresses the salience of this disconnection in relation to mental health, most poignantly regarding youth suicide. Compelling evidence has been found to demonstrate that increasing cultural continuity decreases the occurrence of suicide (Chandler and Lalonde 1998; Wexler and Gone 2012).

Among those at the highest risk levels for suicide are Indigenous youth, leading to efforts to address and monitor mental health among school-aged Indigenous children. Roué (2006) notes that seemingly "universal" Western, classroom-based education, can lead to "double social exclusion" rather than "double inclusion" for Indigenous children. Double inclusion refers to the notion that by attending Western-based schools, Indigenous students are included in the "majority culture" as well as their own Indigenous culture (Roué 2006). However, it is more often the case that Indigenous students experience consistent failure while in school, resulting in exclusion from the school system and the workforce, while additionally they have lost cultural points of reference with members of the older generations, leading to exclusion within their own communities (Roué 2006). It is important to understand that promoting the idea of double inclusion in defense of a Western education fails to acknowledge the harsh reality of double social exclusion for Indigenous youth.

In an effort to address the intergenerational wounds of the residential schools, Elders are making use of "bush schools" in order to "transmit their culture and knowledge, not only to the generation of their children, but also to that of their grandchildren" (Roué 2006, p.16). As a result, some Elders have decided to take on the role of healer and return to the land with Indigenous youth. Recent research has affirmed the importance of focusing on community

strengths and interventions developed within communities rather than focusing on pathology and dominant culture treatment paradigms applied to Indigenous populations (Brady 1995; Kirmayer et al. 2003; McCormick 1996; Poonwassie and Charter 2001; Wexler and Gone 2012). Communities are strengthened by effectively being able to treat their own youth with approaches developed by and for their own membership (Kirmayer et al. 2003; Poonwassie and Charter 2001).

Additionally, there is significant evidence that culturally relevant approaches to treatment are needed when working with Indigenous clients, owing to divergent concepts of self, models of health, and family (McCormick 1996; Recollet et al. 2011; Robbins and Dewar 2011). According to the National Collaborating Centre For Aboriginal Health: “A common ground is emerging among a number of approaches to health and wellbeing, based on reconnecting people and place, and a recognition of past and present driving forces of social and ecological change as interrelated determinants of health” (Parkes et al. 2003, as cited in Parkes 2011, p. 2). If, as Lamouche (2010) suggests, “break with the land is the single most important factor in health problems among Aboriginal people” (as cited in Robbins and Dewar 2011, p. 13), then connection to the land may be a crucial part of Indigenous mental health and healing initiatives.

Programs that address this essential connection are termed “land-based” interventions. Although concrete definitions are sparse, these types of programs are “rooted in the land, traditional knowledge, spiritual values and ceremonial practice” (Plaskett and Stewart 2010, p. i). Furthermore, they often aim to “balance the instruction of traditional skills with opportunities for individuals...to re-establish cultural identities and connect spiritually with nature over an extended period of time” (The Minister’s Forum on Addictions and Community Wellness 2013, p. 5). In addition, they serve to “strengthen and facilitate intergenerational knowledge mobilization” (Chisasibi Wellness 2014, p. 2).

The goal of the present study was to contribute to a deeper understanding of land-based interventions and how these interventions may be applied within Indigenous communities, ultimately enhancing the quality of mental health care and improving outcomes. To accomplish this goal, we conducted interviews with three community members—including one individual directly involved in managing a land-based program in northern Ontario—who shared their personal experiences of well-being associated with being on the land. We then summarized from these interviews participants’ perspectives regarding the background, central components, advantages, and challenges of the program.

Method

The method employed for this study was phenomenological, drawing on the work of Giorgi (1985, 2009) as well as Colaizzi (1973, 1978), who emphasized the importance of focusing on the experiences of participants in their own words. Other research along these lines has been characterized as descriptive phenomenology (Shosha 2012; Welch 2011), phenomenography (Marton 1981, 1986), and thematic analysis (Braun and Clarke 2006). A particularly important feature of our method was facilitating dialog as a component of both data collection and data analysis. With regard to data collection, we drew upon the scholarship of Churchill (2000, 2012) and Walsh (2004) by facilitating a conversation with and among participants. In practical terms, this entailed favoring talking with participants and eliciting spontaneous accounts of their experiences rather than employing structured protocols or surveys. With

respect to data analysis, our method was inspired by dialogical phenomenology (Halling et al. 1994) in that we collaborated to discern key features and common themes across participants. In contrast to prior phenomenological research, we also identified for the purposes of comparison programs similar in orientation to the one described by participants in our study.

Overview of Project George

Project George was created in 2009 to address the large number of youth suicides occurring in the local Moose Factory and Moosonee area (Moose Cree First Nation, n.d.). With advice from Elder George E. Echum, Charlie Cheechoo spearheaded the project with the goal of reconnecting the youth to the land and Cree culture in order to prevent further fatalities (Moose Cree First Nation n.d.). The program aims “to create a community where youth are hopeful about their future, and strong and resilient in dealing with life’s challenges” (Moose Cree First Nation n.d., p. 4). Funded primarily through donations and in part by the Government of Ontario, this all-season camp is run by volunteers and guided by the experience of Elders, allowing kids to learn about and gain experience with “traditional Cree bush skills” (Moose Cree First Nation n.d., p. 3). All youth from ages 12–20 are able to participate; however, the project is mainly designed for “at-risk” youth who need significant support (Moose Cree First Nation n.d.).

Participants

This study involved three participants affiliated with the only land-based intervention offered in this particular community. One of the participants was previously known to the second author through his work in the region. That participant invited two additional participants, a hospital board member supporting local mental health interventions, and a new staff member planning to continue the land-based program following the retirement of the current director. The three individuals were offered an honorarium for their participation, were informed of their right to withdraw from the study at any time, and were assured that data collected was in compliance with OCAP principles, tri-council policy regarding research with Indigenous populations, and had been approved by an institutional Research Ethics Board.

Procedures

The authors invited the three participants, all known to each other within the same community, to take part in a conversation regarding the land-based intervention with which they are affiliated. This conversation took place amidst the current director’s plans to transition out of that role, and the new staff member’s intention to work towards directing future land-based programs. In attendance was the second author (facilitator) and two research assistants. Following a territorial acknowledgement and opening words, an overview of the meeting was provided by the facilitator. Following this introduction, the facilitator posed three open-ended questions for conversation:

1. What are the key components of this land-based intervention?
2. What are the challenges in offering a land-based intervention?
3. What are the main steps in transferring knowledge about land-based interventions?

The conversation was audio recorded and the research assistants recorded behavioral notes. The facilitator posed brief follow-up questions (e.g., “Can you tell me more about that?”). The resulting conversation lasted approximately 2 h. Following this meeting, the research assistants transcribed the audio recording and the transcriptions were analyzed qualitatively in order to find apparent themes from the conversation.

Transcribed interviews were subjected to the following stages of qualitative analysis: The first author, an expert in hermeneutic research, highlighted key words and phrases pertaining to the following categories: (1) referents to key components of land-based interventions, (2) referents to challenges in offering land-based interventions, (3) referents to the transfer of knowledge regarding land-based interventions, and (4) referents to aspects not readily categorized within the preceding three categories. These initial categorized data were then reviewed by the second author, and refinements were made until consensus was obtained. Once a list of common themes was articulated, participants were invited back for a second meeting.

The categorized data were brought back to the participants and reviewed for apparent inconsistencies, omissions, or alternative interpretations, and were then edited in light of participants’ elaborations. At this second meeting, participants were presented with the themes and asked: “In trying to understand what was said at our last meeting, we have come up with the following list of themes. Please let me know if you have anything to add, or if we have misunderstood anything and you would like something changed or removed.” At this meeting, participants verified, adjusted, and expanded upon themes. These additional comments were recorded and once again transcribed in order to further clarify the list of themes.

Results

Our two-stage process of interviews and analyses yielded the following broad categories of content: Background, Key Components, Perceived Advantages, and Perceived Challenges. In the following paragraphs, we will elaborate these categories.

Background

The two older participants spoke of experiences in their early youth when they accompanied their grandparents on trips to gather wood and hunt. These experiences involved a shared connection to the land with their elders. Despite the challenges they faced as adolescents, both found a sense of peace and purpose in the bush:

“It wasn’t my parent that took me out there. I remember going out there with a dog team with my grandad while he went to get his wood... And it wasn’t much – what I was doing out on the land – it was just being... Just being in touch, connecting with that natural environment. It’s almost like therapy, but you’re just sitting here with your own thoughts. And you’re just taking in everything that’s around you.”

“I went out with a dog team also... We would leave in the middle of March, go spring hunting, and come back in the middle of May. And I don’t ever remember being bored... You don’t cut wood all day, you don’t fish all day, you don’t trap all day. It’s just being out there... We were starting to get into alcohol and drugs when we were teenagers, but when we’d go out in the bush I wouldn’t miss the alcohol and drugs. It was, I don’t know, so peaceful.”

According to all participants, previous generations had regular connection with land, family, and Cree ways and culture. With the loss of these has come an increase in isolation and suicides. The participants reported growing up at a time when these connections to land and Cree culture were beginning to slip away, but their experiences in the bush helped them face the challenges of adolescence:

“Never once did I think about taking my own life. Never. Sure I was sad a lot of times, depressed, but I never thought about ending my life. Nowadays it’s a quick solution for a lot of youth... The connection, I think has been missing... just being out there and having family support you. And teaching you things on the land. You learned by listening. Looking and listening... It’s more a spiritual thing almost.”

“The schools discourage you – discouraged our parents and grandparents from yanking you out of school to go to the bush: ‘what are you gonna do in the bush?’ Most of what I learned was out there... Most of the time, where I grew up, there was too much bullying. And the teachers were the biggest bullies around. Which is why I loved going out into the bush.”

This land-based program, which draws upon the older participants’ experiences of resilience facilitated by connection to the land, tries to reconnect current adolescents to their land, their culture, and each other.

“It’s all a land-based program, it’s very simple. We teach kids what we were taught when we were kids... we teach them how to fish, hunt, camping, gathering wood, pick berries, and trapping... We started land-based program when I was deputy chief because of the high rates of suicides.”

Key Components

Participants identified six components of their land-based program. The first is the transfer of specific knowledge and skills (“Hunting, fishing, trapping, camping”). While some of these skills are specifically taught, many are learned through observation and collaboration:

“The kids see you chopping wood, kindling it up for fire, and they ask you, ‘who taught you that?’ You go, ‘I don’t know.’ Nobody actually teaches you to cut wood. Nobody tells you, ‘here, I’m gonna show you how to chop wood.’ And I tell the kids, ‘okay, just watch me; I’m not gonna show you how, just watch me’”.

It was noted that this transfer of specific knowledge and skills is separate from, but complemented by, “the traditional part” of “the sweat lodges and the ceremonies,” which is the focus of other programs. In other words, while other aspects of Cree traditions, such as sweat lodges and ceremonies, were not seen as part of the land-based program, they were viewed as enhancing the knowledge and skills learned in the program. It was also noted that learning skills in the bush facilitates a sense of identity and self-confidence that extends beyond the bush:

“Being out in the bush provides me with a sense of identity. Thus is an integral piece of Indigenous culture and way of life. It provides you with a sense of pride and esteem... by learning to do things out in the bush and transferring this knowledge into your own

life, (for example), in pursuing an education the strength, courage and diligence needed can be compared to the strength required to track a moose.”

The second component of the land-based program identified was described as team work (“You’re out there, you’re sharing duties, and that’s the best way I can explain it: it’s teamwork”). This collaborative working builds upon the sense of “connectivity with the land” with “feeling part of the bigger picture” and trusting and relying on one another. Related to this is the third component of relationships with facilitators and other participants. These relationships, which develop through shared time and collaborative activities (“that relationship that develops because of that dependency on one another to be able to function in the bush”), between facilitators and participants (“I’ve had kids that don’t have a dad say, ‘you’re the closest thing to a dad’... I kind of become a parent figure to these kids during these programs”), between participating family members (“there’s a lot of communication in the bush between family members”), and between fellow participants (“the first time these two kids were together, they sort of looked at each other for 5 minutes; 10 to 15 minutes later they started working together – it doesn’t take long”). These relationships provide opportunities for mutual conversation and support, towards the goal of recognizing one’s connection to the community:

“Aboriginal culture is defined by having a connection and relationship with the land, but this is just one aspect – you have family in community, a family that are next door. Without knowing these relationships and knowing how you are connected with other you become isolated and alone... This loneliness seems to be a big factor that is affecting the youth – they lack awareness about the relationships that exist with others. This lack of awareness also extends to culture and being a part of the land.”

A fourth component identified is program participants’ involvement in decision-making. Rather than having a fixed curriculum or set of activities for all, the program allows participants to choose:

“All these activities that we participate in, are provided for them and selected by them. It gave them a bit of ownership – ‘This is what I wanna learn. This is what I need to learn.’ So that made things a little bit easier in terms of communicating and relating to them.”

A fifth component of the land-based program is the involvement of Elders. This was seen as a necessary component that facilitated the sense of intergenerational connection. The Elder’s level of activity in the bush was seen as unimportant (“A good elder doesn’t even say much”); what mattered was his presence (“just sitting there with a smile on their face”).

Lastly, the older individual emphasized that his land-based program combined traditional practices and new outdoor activities:

“I think it’s important to mention that The Land-Based Program isn’t all traditional Indigenous stuff. The kids love wakeboarding, tubing, target practicing, volleyball, swimming which is done in the bush. It isn’t all just hunting and trapping. It gives them an opportunity to do something they look forward to and that they simply enjoy doing.”

In addition to these six components identified by the participants, there were other noteworthy features revealed in the conversation. One pertained to the recruitment of participants:

“We look for the kids who don’t play sports, don’t go to gatherings or dances. We find them in the schools or at homes.”

“it is difficult to take a kid into the bush who is suicidal as we aren’t social workers. We always have to look out for our program because taking suicidal kids can result in many bad things happening. If a kid who is threatening to commit suicide, we won’t take them out to the bush yet. We wait for whoever can give us the green light (e.g., counsellors).”

Participants also noted that their connection with the adolescents involved in the land-based program may continue after their shared time in the bush (“the kids come and see us. They continue to keep in contact. I think how I am friendly, humorous, and engage in a lot of laughter has a lot to do with why the kids want to keep in contact”). Also noted was the desire to expand the land-based program so that it can include parents and caregivers:

“I’m heading in the direction of getting the family unit, or at least the caregivers, working with youth. I’d like to make that step in getting caregivers involved with land-based activities. I think it’s a strong, neutral base or environment from which a lot of people can initiate healing... a natural environment such as the bush is more conducive for our people to begin talking.”

There was also a compelling story related by the current program director regarding one program participant:

“...we picked up A, this young man, 18 or 19 years old... I did not know at the time - I found out later - A tried hanging himself twice. His dad died at 14. His mom is incapacitated in a home.... She was never really there. He was looked after by an uncle who’s an alcoholic. So everything was stacked against him. He tried hanging himself. First time he tried hanging himself - this is his story - the rope broke. He went back the next day. He used a wire, an extension cord. The branch broke. And he chuckles. And when he’s telling me the story he says, ‘I told myself, someone’s trying to tell you something here.’ And I said, ‘I know, that’s what I was thinking.’ And he said, ‘there I am, laying on the ground after bouncing off the ground, falling 10 feet. I’m gasping for air. Here I am trying to kill myself and trying to gasp for air. I should’ve just laid down and stopped breathing.’ And then I walked in. Not knowing what A just did a few days before that. We took him out. And we had a chance to work with A for about a month. Every trip he came out. I saw something in A. And I applied for a grant before that. And the grant came in and I could hire a young man. For 6 months. We got him to work and we got him away from Place B. Got him in the bush. After 6 months he got extended for another 6 months. I told him ‘I just found out you don’t have your high school.’ And he says no. ‘I’m gonna have to lay you off unless you go over to the education building and sign up. There’s a crash course. Finish your high school.’ I knew he had it in him, he was 6 credits short. I said, ‘get your 6 credits, get your high school. It’ll take you three months and you can continue working here.’ He said, ‘but what about my job today?’ I said ‘you can do 40 hours and seven days weekends and evenings.’ He said ‘okay.’ He worked like a dog. School, six hours a day. He did not know I was bluffing. He graduated from high school. I went up to him a couple months later and said ‘you ever think of going to college?’ He says no. I say ‘I think you should go to college.’ He says ‘What am I gonna take?’ I said ‘I don’t know, you tell me, what do you wanna do?’ He says ‘I wanna be a policeman.’ ‘Okay’, I told him. ‘I’ll give you a hand.’ A year and a half later he’s

accepted to go to a college in Place H. Two years later he graduated with honours, top of the class. And I called him and I said, ‘what are you gonna do now?’ And he says, ‘Oh, I don’t know. I’m looking for a job, I applied everywhere.’ I told him ‘I just got a grant to hire an assistant. You wanna come and work in Place B?’ He was in Place B two days later. He’s still with me, he will not leave. He wanted to be a cop but now he’s still with me. So that’s one successful story.”

Advantages

When asked to describe the benefits of the land-based program, participants identified the focus on health (rather than mental illness) as an important advantage:

“Counsellors are not always the key in helping individuals with their own problems, this is where pathologizing our youth and their self-harm can become an issue, maybe it’s not a counsellor that is needed to treat them. Before we go into the whole clinical aspect, maybe it’s establishing a connection and having these kids go out into the bushes that help can alleviate their pain.”

“So I firmly believe that a land-based project will take away from that stigma (of mental illness and treatment), where an individual or family member or community member won’t hold back. I feel with these types of programs they’re very inviting.”

The land-based program was seen as facilitating connection to Cree ways and culture (“it teaches them about our ways, our culture”), nature (“You develop a true respect for nature -it’s not all physical being out there, a big part of being on the land is the spiritual, emotional and mental impact it provides us with”), family and community (“We’re all related and being aware of that, I think, bring that togetherness”), identity (“being out in the land made me connect with my own self, I guess you could say - my own identity.”), and spirituality (“This connection to the land is what paves this spirituality - it’s not God or Jesus that is out in the bush, it’s this relationship that develops to the land”), as well as pride and self-esteem (noted earlier).

Challenges

When asked about the challenges faced by the land-based program, participants identified costs and the difficulty securing financial support as formidable obstacles. Regarding costs, they cited camp rentals, liability insurance, transportation, food, remuneration for Elders, and extra labor (the program currently relies primarily on volunteers) as factors making one trip of 4 days cost well in excess of \$6000. They also noted that, as the program is not considered a mental health program, many sources of funding are not accessible for land-based projects. They emphasized the need for changes in viewpoint among “the people with purse strings” who “need to be more aware of how we do things up here.”

Provincial policies were also described as a challenge (“The province makes it difficult - they have so many rules and regulations to follow compared with the federal government”), as were restrictions of some granting agencies (“Grants may come from groups like a casino, but a lot of times these grants are not available for children and their specific activities”). The use of firearms for hunting was mentioned as a particularly problematic issue for funding agencies.

Discussion

The land-based program examined in this current study is one of many small programs across Canada. At present, there exists a variety of on-the-land interventions for Indigenous people, including the following four examples from different locations across Canada, all of which are based on Indigenous culture, rely on the knowledge held by Elders, and involve intergenerational knowledge transfer.

The Addictions Recovery Program, located in British Columbia, was developed in 1990 by Carrier Sekani Family Services, a non-profit agency supporting 11 local bands of First Nations (Dobson and Brazzoni 2016). The program strives to “create a healing environment by utilizing a holistic approach that promotes a cultural lifestyle free from addictions and restores a sense of pride in the Carrier and Sekani Culture” (Carrier Sekani Family Services *n.d.*, para. 1). Funded by the Government of Canada, it runs for 28 days at a camp on the traditional territory of Ormond Lake, and is administered by a team of addiction counselors, a therapist, a cultural worker, and camp staff (Dobson and Brazzoni 2016). Traditional practices form a significant part of the program, and include smudging, sweats, hunting, preparing traditional medicines, as well as making cultural crafts such as drums and dream catchers (Dobson and Brazzoni 2016). Though the program is grounded in tradition, it is perhaps most focused on balancing these practices with more Western approaches to treatment, such as engaging in sessions with a clinical counselor or therapist to develop personalized goals for treatment and learning how to prevent relapses (Dobson and Brazzoni 2016). As a result, the program promotes “two-eyed seeing” which, according to Mi’kmaw Elder Albert Marshall, involves appreciating the strengths of both Indigenous and Western knowledge in all their forms (Institute for Integrative Science & Health 2013, as cited in Dobson and Brazzoni 2016).

The Take a Kid Trapping and Harvesting program, located in the Northwest Territories, was created in 2002 in response to the fact that most trappers and harvesters were older adults (Department of Industry, Tourism, and Investment [ITI] 2014). The goal of the project is to promote youth involvement in these traditions through the transfer of knowledge, specifically by “introduc[ing] Northwest Territories (NWT) youth to the traditional life-skills practices of hunting, trapping, fishing, and outdoor survival” (ITI 2014, p. 1). Funded by the Government of Canada, the program is run by ITI alongside “the Departments of Municipal and Community Affairs (MACA), Environment and Natural Resources (ENR) and Agriculture Canada” (ITI 2014, p. 1). A unique feature of this program is that projects are mainly carried out through schools, as well as other Indigenous organizations (ITI 2014). As an example, 46 trapping, harvesting, and hunting projects were carried out in five regions of the Northwest Territories from 2013 to 2014 (ITI 2014). Specific activities for youth, often provided using the knowledge of community Elders, include setting traps and nets, preparing pelts, and learning about navigation and survival skills (ITI 2014).

The Caring for the Circle Within program, located in the Yukon Territory, was developed in 2010 by the Kwanlin Dun First Nation (KDFN) community to focus on the complex needs of individuals suffering from substance abuse, grief, violence, and the after effects of residential schools (KDFN Justice Department 2010). Its mission is to “provide a supportive, land-based, holistic and compassionate environment based on the integration of traditional and modern knowledge in order to create balance and self-empowerment” (KDFN Justice Department 2010, p. 2). Funded by the Government of Yukon, the Federal Government, and the KDFN, the land-based healing project is open to all Yukon Peoples—First Nation or otherwise—and is held at the Jackson Lake Healing Centre, where participants stay for the extent of the program

(KDFN Justice Department 2010). The camp is run by individuals specializing in both traditional and Western methods, to provide a balanced approach to treatment (Plaskett and Stewart 2010). Furthermore, a key aspect of the healing process is believed to involve “redefining one’s identity as a First Nation person” (Plaskett and Stewart 2010, p. ii). As a result, traditional activities such as hunting, fishing, canoeing, and gathering medicines, as well as beading, singing, and making drums and knives are a core part of the program (KDFN Justice Department 2010). In addition, a perhaps unique focus of the camp includes learning to foster connections through problem solving and relationship building, to such a degree that, during the pilot program, individuals formed social support groups that stayed in touch after the program ended (KDFN Justice Department 2010).

The Chisasibi Land-Based Healing Program, located in Quebec, was developed in 2012 by the Chisasibi Miyupimaatisiun Committee, alongside the Nishiyuu Miyupimaatisiun Department, as a response to a demand for more community-based services that directly addressed the needs of members (Chisasibi Wellness 2014). In fact, it is considered to be “the first formal and structured land-based program in Eeyou Istchee (Cree ancestral territory)” (Radu et al. 2014, p. 88). The components of the program are based on Elder Eddie Pash’s Land-Based Healing Model (LBHM), which is meant to be used as a framework for communities to adapt to suit their own needs (Chisasibi Wellness 2014; Radu et al. 2014). It is funded in part by the Cree Board of Health and Social Services of James Bay (CBHSSJB) and Health Canada (Chisasibi Wellness n.d.), and is designed to help individuals struggling with substance abuse and various types of trauma, including residential schools, by aiming to “strengthen the ability of participants to lead a healthy, fulfilling and resilient life” (Chisasibi Wellness 2014, p. 3). The program is available to all members of the community, either by their own choice or who are referred as a sentencing alternative (Radu et al. 2014).

Founded on the Cree view of wellness, which reflects the belief that “the land and cultural traditions have healing power” (Chisasibi Wellness 2014, p. 3), the 10-day camp is held on Cree hunting grounds and run by an Elder, program coordinator, healer/counselor, office manager, and camp helpers (Chisasibi Wellness 2014). During the program, individuals are taught Cree history and connection to nature, engage in group discussions, see a traditional counselor/healer using Cree, and sometimes Western, treatment methods, and gain experience hunting, trapping, setting up camp, and making tools (Chisasibi Wellness 2014). These land-based programs, while varying in scope and specific practices, all affirm the health and healing potential of reconnecting Indigenous people to a fundamental relationship with their land. These programs also heed the call for “strengthening ethnocultural identity [and] community integration” in order to improve the mental health of Indigenous communities (Kirmayer et al. 2003, S15). As noted by Kirmayer et al. (2011), “Aboriginal notions of personhood root identity in a person’s connections to the land and environment” (p. 88); therefore, “the natural environment provides not only sustenance but also sources of soothing, emotion regulation, guidance, and healing” (p. 89).

There is a growing awareness that dispossession from the land has been a significant factor in the development of addiction and other mental health problems among Indigenous people (Brady 1995; Richmond and Ross 2009). Dispossession affects Indigenous health by altering the fundamental “cultural connections between land and identity” (Richmond and Ross 2009, p. 410) and the “special and spiritual relationship with the land” (Brady 1995, p. 1494) that sustain a sense of well-being. Hence, mental health and healing necessarily entail some sense of “renewed contact with the land, regaining what was lost” (Brady 1995, p. 1494)—perhaps the key feature of land-based interventions.

Intergenerational connection, another feature of the land-based intervention in this study, has been characterized by others as “a tool for cultural continuity and empowerment” (Radu et al. 2014, p. 96). In examining wellness, unhappiness, and community change among Inuit in Nuavut, one group of researchers (Kral et al. 2011) found that “Intergenerational segregation is an increasingly common feature of community life” (p. 432) despite the fact that “family life is essential to Inuit conceptions of well-being” (p. 435). These researchers noted that “Inuit youth feel increasingly alone with experiences of a global society that diverge from the life experiences of their parents and elders” (ibid.). While there are many complex factors contributing to this isolation, it seems likely that increasing the sense of connection across generations can repair this experience of isolation.

In addition to connection across generations, the land-based intervention explored in this study was oriented towards building relationships among program participants. This is consistent with other research suggesting that “fostering positive relationships is the principal goal of Indigenous healing” (Radu et al. 2014, p. 95). However, as highlighted by McCormick (1996) and LaFromboise (1988), the degree to which typical health interventions affirm individuality may run counter to this relational emphasis. Indeed, even the structure of many mental health interventions, wherein treatment occurs in isolation from community, seems problematic from this viewpoint (Dauphinais et al. 1981). Regarding suicide specifically, Wexler and Gone (2012) point out that the Western approach to suicide prevention, which involves “referring the suicidal person to the mental health system” (p. 802), could actually “further alienate the person who is suicidal from the social and cultural context in which effective assistance is most likely to emerge” (p. 804). Yet physical isolation in the Western sense is not the only issue with this form of treatment. In an Indigenous context, isolation has more to do with a lack of what is often considered a spiritual connection between individuals (Radu et al. 2014). It is therefore likely that programs that help re-establish relational connections among Indigenous people may be both curative and preventative with respect to mental health problems.

The land-based program that was the focus of this study, along with comparable land-based programs across Canada, affirms the value of (re)building a bridge between Indigenous youth and their peers, elders, and ancestors, as well as their culture and traditions. As stated by Radu et al. (2014), “healing in the bush, especially for younger generations, means learning about their ancestors [and] reconnecting with history and the physical landscape” (p. 95). Thus, by participating in traditional activities on the land, individuals are (re)connected not only to each other, but also to their past relatives and the spirits of nature. It is in this way that land-based programs may help to repair a history of trauma for Indigenous communities. For example, in a study of resilience among Inuit youth, Kral and colleagues (Kral et al. 2014) found that participants enjoyed cultural activities and “indicated that being on the land was good for them” (p. 682). Support for land-based programs is also reflected in green space research, which suggests that being in nature is healing beyond the specific mental health issues experienced by Indigenous people (Van den Berg et al. 2010). As a result, these types of programs may be applicable within a variety of communities.

Echoing reports by others (Kirmayer et al. 2003; Lavoie et al. 2007; Recollet et al. 2011), participants in the current study spoke of obstacles faced by Indigenous healing interventions such as the land-based program. Issues regarding funding, jurisdiction, and transportation, among others, make carrying out these programs no easy matter. Yet despite these challenges, numerous communities are establishing such programs. Indeed, the very acts of creating and implementing these programs call upon collaborating relationships and intergenerational

connection, as well as affirming the importance of the land and related traditions—the very features of wellness that the interventions aim to foster among participants. Perhaps, the best way to facilitate the growth of these programs is invite those involved to share their stories. Our hope is that qualitative research can assist in this process. By privileging community members’ perspectives in their own words, this research affirms the value of community-centered approaches that build research and intervention programs from the “inside out.”

Acknowledgements The Authors express their appreciation for the hospitality and participation of the participants from Project George and acknowledge the contributions of University of Guelph-Humber Psychology Students: Priscilla Chou and Briana Jackson.

Compliance with Ethical Standards

Informed Consent Informed consent was obtained from all participants included in this study.

Open Access This article is distributed under the terms of the Creative Commons Attribution 4.0 International License (<http://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license, and indicate if changes were made.

References

- Brady, M. (1995). Culture in treatment, culture as treatment: A critical appraisal of developments in addictions programs for indigenous North Americans and Australians. *Social Science & Medicine*, *41*(11), 1487–1498.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(2), 77–101.
- Carrier Sekani Family Services. (n.d.). Addictions recovery program. Retrieved from <http://www.csfs.org/services/addictions-recovery-program>.
- Chandler, M. J., & Lalonde, C. E. (1998). Cultural continuity as a hedge against suicide in Canada’s First Nations. *Transcultural Psychiatry*, *35*(2), 191–219.
- Chisasibi Wellness. (2014). Land-based healing program. Retrieved from https://www.chisasibiwellness.ca/images/pdfs/LB/Land-based%20curriculum_final.pdf.
- Chisasibi Wellness. (n.d.). A few words about us. Retrieved from <https://www.chisasibiwellness.ca/about-us>.
- Churchill, S. (2000). “Seeing through” self-deception in narrative reports: Finding psychological truth in problematic data. *Journal of Phenomenological Psychology*, *31*, 44–62.
- Churchill, S. (2012). Teaching phenomenology by way of a “second-person perspective” from my thirty years of teaching at the University of Dallas. *Indo-Pacific Journal of Phenomenology*, *12*. <https://doi.org/10.2989/IPJP.2012.12.1.6.1114>.
- Colaizzi, P. (1973). *Reflection and research in psychology*. Dubuque: Kendall Hunt.
- Colaizzi, P. (1978). Psychological research as the phenomenologist views it. In R. Valle & M. King (Eds.), *Existential-phenomenological alternatives for psychology* (pp. 48–71). London: Oxford University Press.
- Danto, D., & Walsh, R. (2017). Mental health perceptions and practices of a Cree community in northern Ontario: A qualitative study. *International Journal of Mental Health and Addiction*, *15*, 725–737.
- Dauphinais, P., Dauphinais, L., & Rowe, W. (1981). Effects of race and communication style on Indian perceptions of counselor effectiveness. *Counselor Education and Supervision*, *21*(1), 72–80.
- Department of Industry, Tourism, and Investment. (2014). Take a kid trapping & harvesting: Report 2013–2014. Retrieved from http://www.iti.gov.nt.ca/sites/iti/files/take_a_kid_trapping_and_harvesting_report_2013_14.pdf.
- Dobson, C., & Brazzoni, R. (2016). Land based healing: Carrier First Nations’ addiction recovery program. *Journal of Indigenous Wellbeing*, *1*(2), 9–17.
- Giorgi, A. (1985). *Phenomenology and psychological research*. Pittsburgh: Duquesne University Press.

- Giorgi, A. (2009). *The descriptive phenomenological method in psychology: A modified Husserlian approach*. Pittsburgh: Duquesne University Press.
- Gone, J. P. (2013). Redressing First Nations historical trauma: Theorizing mechanisms for indigenous culture as mental health treatment. *Transcultural Psychiatry*, 50(5), 683–706.
- Halling, S., Kunz, G., & Rowe, J. O. (1994). The contributions of dialogal psychology to phenomenological research. *Journal of Humanistic Psychology*, 34(1), 109–131.
- Institute for Integrative Science & Health. (2013). *Two-eyed seeing*. Retrieved from <http://www.integrativescience.ca/Principles/TwoEyedSeeing/>. Accessed 6 September 2018.
- Kirmayer, L. J., Brass, G. M., & Tait, C. L. (2000). The mental health of Aboriginal peoples: Transformations of identity and community. *The Canadian Journal of Psychiatry*, 45(7), 607–616.
- Kirmayer, L. J., Simpson, C., & Cargo, M. (2003). Healing traditions: Culture, community and mental health promotion with Canadian Aboriginal peoples. *Australasian Psychiatry*, 11, 15–23.
- Kirmayer, L. J., Dandaneau, S., Marshall, E., Phillips, M. K., & Williamson, K. J. (2011). Rethinking resilience from indigenous perspectives. *The Canadian Journal of Psychiatry*, 56(2), 84–91.
- Kral, M. J., Idlout, L., Minore, J. B., Dyck, R. J., & Kirmayer, L. J. (2011). Unikkaartuit: Meanings of well-being, unhappiness, health, and community change among Inuit in Nunavut, Canada. *American Journal of Community Psychology*, 48, 426–438.
- Kral, M. J., Salusky, I., Inuksuk, P., Angutimarik, L., & Tulugardjuk, N. (2014). Tunngajuq: Stress and resilience among Inuit youth in Nunavut, Canada. *Transcultural Psychiatry*, 51(5), 673–692.
- Kwanlin Dun First Nation Justice Department. (2010). Caring for the circle within: Jackson Lake land-based healing camps 2010. Retrieved from http://www.kwanlindun.com/images/uploads/The_Circle_Within-EMAIL_VERSION.pdf.
- LaFromboise, T. D. (1988). American Indian mental health policy. *American Psychologist*, 43(5), 388–397.
- Lamouche, J. (2010). *Aboriginal Peoples health within the health sciences: A Metis, Inuit & First Nations specific health series*. In M. Anderson (Keynote Speaker) (Ed.), *First Nations health session*. Hamilton: McMaster University.
- Lavoie, J. G., Forget, E., & O’Neil, J. D. (2007). Why equity in financing First Nations on-reserve health services matters: Findings from the 2005 national evaluation of the health transfer policy. *Healthcare Policy*, 2(4), 79–96.
- Marton, F. (1981). Phenomenography: Describing conceptions of the world around us. *Instructional Science*, 10, 177–200.
- Marton, F. (1986). Phenomenography: A research approach to investigating different understandings of reality. *Journal of Thought*, 21(3), 28–49.
- McCormick, R. (1996). Culturally appropriate means and ends of counselling as described by the First Nations people of British Columbia. *International Journal for the Advancement of Counselling*, 18, 163–172.
- McCormick, R. (2009). Aboriginal approaches to counselling. In L. Kirmayer & G. Valaskakis (Eds.), *Healing traditions: The mental health of Aboriginal peoples in Canada* (pp. 337–354). Vancouver: UBC Press.
- Moose Cree First Nation. (n.d.). Project George: Reconnecting with the land. Retrieved from <http://www.moosecree.com/projectgeorge/donorbooklet.pdf>.
- Parkes, M. W. (2011). Ecohealth and Aboriginal health: A review of common ground. Retrieved from <https://www.cnsa-nccah.ca/docs/emerging/FS-EcohealthAboriginalHealth-Parkes-EN.pdf>.
- Plaskett, R., & Stewart, B. (2010). Program overview & evaluation report. Retrieved from <http://www.kwanlindun.com/images/uploads/KDFN%20Caring%20for%20the%20Circle%20Within-Evaluation%20report%202010.pdf>.
- Poonwassie, A., & Charter, A. (2001). An Aboriginal worldview of helping: Empowering approaches. *Canadian Journal of Counselling*, 35(1), 63–73.
- Radu, I., House, L. M., & Pashagumskum, E. (2014). Land, life, and knowledge in Chisasibi: Intergenerational healing in the bush. *Decolonization: Indigeneity, Education & Society*, 3(3), 86–105.
- Recollet, C., Rego, C., Partridge, C., & Maniwabi, S. (2011). *Health status profile & environmental scan: Aboriginal, First Nations, & Metis*. North East Local Integration Network (NELHIN). Retrieved from <http://www.ontla.on.ca/library/repository/mon/26002/315717.pdf>. Accessed 6 September 2018.
- Richmond, C. A., & Ross, N. A. (2009). The determinants of First Nation and Inuit health: A critical population health approach. *Health & Place*, 15(2), 403–411.
- Robbins, J. A., & Dewar, J. (2011). Traditional indigenous approaches to healing and the modern welfare of traditional knowledge, spirituality, and lands: A critical reflection on practices and policies taken from the Canadian indigenous example. *The International Indigenous Policy Journal*, 2(4), 1–17.
- Roué, M. (2006). Healing the wounds of school by returning to the land: Cree elders come to the rescue of a lost generation. *International Social Science Journal*, 58(187), 15–24.
- Shosha, G. A. (2012). Employment of Colaizzi’s strategy in descriptive phenomenology: A reflection of a researcher. *European Scientific Journal*, 7, 31–43.

- The Minister's Forum on Addictions and Community Wellness. (2013). *Healing voices*. Legislative Assembly of the Northwest Territories. Retrieved from https://www.assembly.gov.nt.ca/sites/default/files/13-06-3td_85-174.pdf.
- Van den Berg, A. E., Maas, J., Verheij, R. A., & Groenewegen, P. P. (2010). Green space as a buffer between stressful life events and health. *Social Science & Medicine*, *70*(8), 1203–1210.
- Walsh, R. (2004). The methodological implications of Gadamer's distinction between statements and speculative language. *The Humanistic Psychologist*, *32*(2), 105–119.
- Welch, K. L. (2011). The extension of Colaizzi's method of phenomenological inquiry. *Contemporary Nursing*, *39*(2), 163–171.
- Wexler, L. M., & Gone, J. P. (2012). Culturally responsive suicide prevention in indigenous communities: Unexamined assumptions and new possibilities. *American Journal of Public Health*, *102*(5), 800–806.
- Wildcat, M., McDonald, M., Irlbacher-Fox, S., & Coulthard, G. (2014). Learning from the land: Indigenous land based pedagogy and decolonization. *Decolonization: Indigeneity, Education & Society*, *3*(3), I–XV.