

Supporting mino-bimaadizi: A national network for ending Indigenous illness and promoting Indigenous mental health and healing



Background

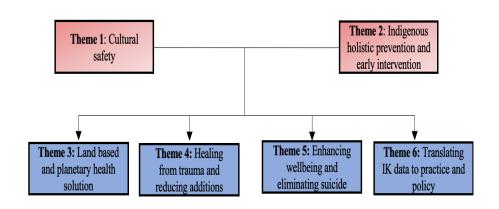
Indigenous peoples with serious mental illness face unique health care barriers due to racism, oppression, and intergenerational trauma of residential school and child welfare systems. Current mental health services focus on crisis and short-term mental health programs; this network will move the focus to holistic culturallybased interventions that prevent illness and strengthen successful wellness.

Objective & Rationale

- HIMHW will be situated in at least 10 sites in Ontario, and will create a national shift from the current system response to Indigenous mental illness, which focusses on Western biomedicalbased crisis and limited-term interventions and supports, to a coordinated strategic system that is based in Indigenous knowledges prevention.
- Indigenous mental illness is currently addressed by the health care system using Western biomedicalbased interventions and models that are culturally inappropriate and ineffective in terms of symptoms reduction and remediation of diagnosis.
- HIMHW will provide Indigenous knowledge solutions, for practice and policy, that will help redress and remove barriers.
- The team will develop a cultural evidence-based Indigenous research network to improve mental wellness by generating data that shows that illness and crisis can be prevented with traditional knowledges, cultural safety, and Indigenous science, when applied to health systems.

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Research Themes & Methodology

Consultation with the research team, community partners, and policy makers was undertaken in 2019; the process and outputs of the network are organized through a cocreated and collaborative Indigenous community-engaged research plan guided by six interwoven themes (In Figure 1).

Student Training & Mentoring

Over the five years of the network, a total of **130 new and emerging scholars** will be mentored by the team across each university site. There will be post-doctoral fellows (PDFs), an Indigenous central research coordinator, and inclusion of student thesis and dissertation as part of the training/ mentorship plan; it is anticipated that 5 PDFs (1 per year); 15 PhDs (3 per year), 30 Masters; MPH, MSc-Epi & MSW, MAs (10 per year), 40 undergrad students (10 per year), and 40 CRAs (10 per year as summer students) will be involved in the network's research plan across all of the universities and its associated research activities divided equally across the academic sites.

Impacts & Outcome

- Indigenous knowledges data and evidence-based programs and interventions that will transform how health services respond to Indigenous mental illness, measurable through a reduction in mental illness and an increase in mental health and wellness;
- Ensuring Indigenous languages, diverse Indigenous cultures and identities, and land-based and planetary health solutions are developed and adopted throughout systems of health care in programs, interventions, and policy;
- Decolonizing Canadian society so that it enables marginalized and oppressed Indigenous peoples, to be able to access mental health services that successfully remediate mental illness and stabilize them in permanent mental health and healing, and to become connected with community and society, thus able to achieve their full potential in life; &
- Situating Canada as a global leader in preventing and ending Indigenous mental illness.
- The overarching goal is to end Indigenous mental illness and support health and wellness though deep and dynamic transformation to health care system programs, interventions, and policy with national and international reach and impacts.

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