

Changing The Language of Mental Health

Vancouver Coastal Health
2009

**My First Counsel Is This: Possess a
Pure, Kindly and Radiant Heart**

Bahá 'u'lláh



Institute for Aboriginal Health

THE UNIVERSITY OF BRITISH COLUMBIA
College of Health Disciplines



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The Institute for Aboriginal Health

Institute for Aboriginal Health

- **Education**

- **IHHS**
- **AHCAP**
- **Masters in Aboriginal Population Health**
- **Summer Science / Blossoming Connections**
- **ISSHA Science and Health Student Association**

- **Community**

- **Connect Students to faculties**

- **Research**

- **Connect communities to research**
- **Develop an IAH research agenda**

Philosophical Focus for Dialogue

- **Indigenous peoples of the Americas had an incredible health care system**
(food-red corn)
- **That this knowledge and system of healing still exists and is strengthening and adapting** (Round Lake)

Philosophical focus for Dialogue

- **That Indigenous practitioners and knowledge have an important role to play in the provision of health care** (Family Practice Medicine)
- **That we, as a people, are engaged in a healing process that is strengthening and accelerating to regain our health** (eagle on moon)
- **And importantly, we will extend holistic health to other Nations and Peoples and to the Earth itself.**

Aboriginal Strategic Health Initiative

Aboriginal Health & Wellness Plan

2008/09

- **Strategy Priority 1.6:**

Change the language of Mental Health and Addictions to better reflect issues facing Aboriginal people (e.g., intergenerational trauma related to grief and loss) in order to improve accessibility and outcomes

Language Change Number One: True Partnership

- **Language must be developed that reflects positive health strategies based on full and HOLISTIC partnerships**
- **Partnerships must include power, control, choice, values and identity**
- **Partnerships must reflect Aboriginal inclusion in ways that acknowledge and respect traditional health care knowledge systems and care givers as full partners in the interprofessional healing process**
 - (build healthy professional relationships)

Aboriginal Strategic Health Initiative Aboriginal Health & Wellness Plan 2008/09

- **Actively collaborate with Aboriginal communities and external partners to indentify a holistic culturally based best practice service delivery model for Aboriginal elders that ensures that programs and services are comprehensive, culturally appropriate and accessible.**

Language Change Number Two: Health and Hope (hope vs fear)

- **We need to redefine the nature of health partnerships based on a positive upward trajectory**
- **We must curtail over pathologizing and disease focused language**
- **We must move away from judgemental language and move toward relational language focused on health**

Waldram

- **Aboriginal peoples have been overpathologized and subjected to the ill-conceived gaze of primarily non-Aboriginal researchers and clinicians.**
- **We have failed to understand the contemporary cultural reality of Aboriginal peoples, he argues, and we have failed to conceptualize culture beyond its usage as a variable (p. 129-130)**
- **We must realize that culture is a source of positive language and healing frameworks and that culturally competency can access this resource**

Language Change Number Three: Emotion must be in the Health Dialogue

- **Holistic Health care requires an approach that must include Emotional health as a foundation to Mental, Physical and Spiritual health**
- **Emotions contain the energy of life, learning and healing**
- **The heart is a place of thought, action and spirit** (work of Dr. Pearsall)
- **We must reduce the emotional toxicity in health care systems and engage emotional literacy and develop emotional competency** (Em Toxicity test)

Emotional Literacy and Health Care Competency

- **Emotional Illiteracy and Competency is foundational to:**
 - **Linguistic literacy**
 - **Cultural Competence**
 - **Understanding the Connection between Multigenerational trauma and suppressed emotions and health**



Importance of Emotional Health Dialogue as a foundation to Mental Health

- **Negative emotions create stress that activate more than thirty hormones and neurotransmitters that can trigger more than fourteen hundred physical and chemical reactions in the body (p. 13)**
- **“In a ten-year study, people who could not manage their emotional stress had a 40 percent higher death rate than non-stressed individuals.” (p. 9)**

Emotions and Health Care

- **Dr John Sarno, professor of clinical rehabilitative medicine at NY University school of Medicine found that in his chronic back pain patients**
- **The level of pain correlated more with the emotional toxicity of the patient than with the severity of the physical difficulty such as a slipped disk.**
- **When Sarno began to include discussions around emotions in his treatment protocol 90- 95 percent of his patients showed a dramatic increased rate of improvement.**
- **This is even more important for populations that have experienced or are carrying multi-generational trauma including grief, fear and anger**

Language Change Number Four: Aboriginal Values and Identity must be part of the Health Care Conversation

- **The inclusion of values and identity into the health care dialogue are essential to achieving cultural competency in treatment**
- **And are necessary for a complete and accurate exploration between the health care provider and patient** (emotions-values-etc)

Patient Values

Relationship

Cooperation

Respect

Generosity

Peacefulness

Sharing

Harmony

Spirituality

Pragmatism

Modesty

Learning through Observation

Caring

Time

Patience

Discipline

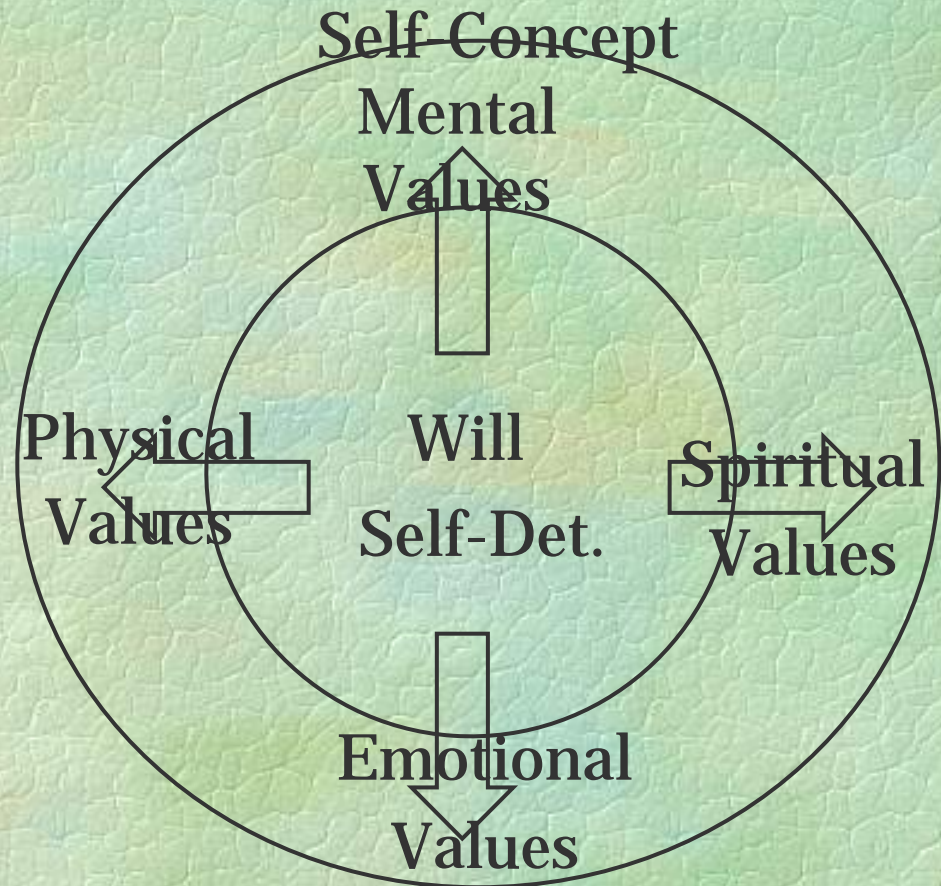
Tolerance

Non-interference

Silence

Patient Identity

Body Awareness



Self-Image

Emotional Values

Self-Esteem

Emotional Energy of Health

World Health Organization

- **Defines mental health as "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to his or her community"**

World health Organization

- **Defines mental health as "a state of well-being in which the individual realizes his or her own abilities (in harmony with their identity and culture), can cope with the normal stresses of life (and can access healing for multi-generational trauma), can work productively and fruitfully (within the context of their values and culture), and is able to make a contribution to his or her community (within a politically sustainable and safe environment) ”**

Conclusion: Health is ultimately about Family



Assignment: Resonance

- **This conference is about identifying and improving the language surrounding Aboriginal Mental Health and Addictions**
- **When you hear a word or phrase that resonates with you record it on the flip charts provided in the conference setting**

- **Jana Mashonee**