

Indigenous Healing and Seeking Safety: A Blended Implementation Project for Intergenerational Trauma and Substance Use Disorders

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Background

- Today there are approximately 1.4 million Aboriginal Peoples living in Canada of whom about 61% are First Nations, 34% are Metis, and 5% are Inuit.
- Rural areas 50%: shortages of healthcare service impact
- Traumatic – Colonization-- forced assimilation-- residential school -
-sexual, physical, and psychological abuse-- European and Canadian teachers, religious figures, government.
- Aboriginal communities in Canada face significant challenges with trauma and substance use disorders (SUD).
- Most Elders, traditional healers and Aboriginal scholars agree that
- connecting to culture, land, community, and spiritual practices is a pathway to healing trauma and SUD in Aboriginal peoples.

Psychological Trauma

- Emotional and Psychological injury
- Response to an extremely stressful or life-threatening
- FIGHT—FLIGHT—FREEZE—TRAPPED—PTSD
- Damage & changes in chemical structure in BRAIN
- Response to future stress altered
- Intrusive thoughts, emotions, feelings, sensations
- Worldview—SELF & OTHERS
- Disconnection—Avoidance
- SPIRITUAL CRISIS “SOUL WOUND”

Intergenerational Trauma

- Intergenerational trauma caused by more than 400 years of systematic marginalization
- Gagne (1998), intergenerational trauma is the transmission of historical oppression and its negative consequences across generations.

Why and How?

- The purpose of this study was to explore whether the blending of Aboriginal traditional healing practices and a Western treatment model, Seeking Safety, resulted in a reduction of intergenerational trauma symptoms and SUD. The Seeking Safety model has been proven effective in other populations, but, prior to this study, there was no evidence on the efficacy of this model in Aboriginal peoples.

Theoretical Framework

An Indigenous Decolonising Methodology

- Indigenous research framework, methodology and approaches were applied throughout the entirety of this project.
- The application of Two-Eyed Seeing;
- Consultation and collaboration with Elders;
- Establishment of an Aboriginal advisory group;
- Incorporation of Aboriginal traditional healing practices (Marsh et al., 2015).

About Seeking Safety

- Seeking Safety (SS) Evidence based model
- Trauma & Addiction
- Safety is the goal
- Empowers and encourages
- Inspires hope
- Groups or individual
- Respect, care, integration, and healing of self, and mirrors the similar concepts of the Aboriginal Grandfather teachings
- (Najavits, 2002). www.SeekingSafety.org

Aboriginal Traditional Healing Practices

- Sweat Lodge ceremonies
- Smudging
- Drumming
- Sharing Circles
- Sacred bundle
- Traditional Healers
- Elder teachings
- Ceremony
- Seven Grandfather Teachings
- (Marsh et al., 2015; Menzies, 2010; Robbins & Dewar, 2011).



Methodology

- Mixed methods approach
- Quantitative inquiry
- Qualitative inquiry
- Qualitative Theoretical Framework
- An Indigenous Decolonizing Epistemology
- Ethical review by the following ethics review board: Laurentian University Research Ethics Board. Approved in May 2013
- Support from the Elders and both research sites

Participants and Setting

- Ojibway 16; Cree 2; Metis 6
- In total, 24 Aboriginal women and men started the program on the 3rd of September 2013.
 - The men's group (n = 12) Rockhaven Recovery Home for men in Downtown Sudbury.
 - The female group (n = 12) N'Swakamok Native Friendship Centre in Sudbury Ontario.
- Two Aboriginal Health care workers / two students from the two mentioned treatment agencies facilitate each group.
- All facilitators had previous experience working with women and men who experienced both trauma and addiction. The facilitators facilitated these groups twice a week for duration of 13 weeks in total. Each group session was two hours long.

Data Collection

- Initial interview & Pre- Tests with researcher: 90min
- Demographics
- Participant's retention (10 sessions)
- Addiction Severity Index Light (ASI-Lite)
- Trauma Symptom Checklist-40 (TSC-40)
- Historical Loss Scale
- & Historical Losses Associated Symptom Scale
- End of Sharing Circle Questionnaire (25 session)

Results Quantitative

Intergenerational Trauma

- 17 completed the program
- Improvement in Trauma S measured by the TSC-40, with a mean decrease of 23.9 (SD=6.4, $p=0.001$) points, representing a 55% improvement from baseline.
- The historical grief scores at baseline were 49.70 (17.22) and 35.29 (10.86) post-implementation; and the historical loss mean scores were 46.11 (16.01) and 41.23 (13.52) respectively.
- Substance use did not change significantly as measured by the ASI-Lite alcohol composite score and drug composite score

Quantitative Results

Table 2: *Changes in Specific Trauma Symptoms for Completers Pre-versus Post-Implementation*

Intergenerational Trauma Composite

TSC-40 Scores Pre-and Post-Implementation

(*: p= 0.001)

TSC Subscales	Baseline		Post-Intervention		Change		
	M	SD	M	SD	M	SD	
Dissociation	7.8	5.0	3.8	3.4	4.0	1.6	p=0.027
Anxiety	9.2	5.8	3.5	2.8	5.7	3.0	p = 0.001
Depression	11.2	5.3	4.6	3.5	6.6	1.8	p=0.000
SATI	7.4	4.0	3.7	3.9	3.7	0.1	p=0.0011
Sleep Disturbance	9.4	4.9	4.6	3.4	4.8	1.5	p=0.003
Sexual Problems	5.1	4.0	2.6	4.1	2.5	0.1	p=0.037

Results

Qualitative

The following four core themes were identified:

- (a) healing through traditional Aboriginal healing methods;
- (b) impact, education and knowledge through the Seeking Safety Sharing Circles;
- (c) awareness, understanding, and the link between trauma, substance use, and the impact of colonization; and
- (d) integration and application of knowledge.

Five Women Gained Custody of Their Children

- A profound outcome of this implementation project included the five women who gained custody of their children. This took place within the third month of and some toward the end of the implementation project. To date, these women are substance free and fully engaged parents.
- Furthermore, the women reported how they had numbed themselves with substances to ease the pain of missing their children.

Conclusion



- Evidence from this quantitative & qualitative data suggests that blending Indigenous Healing and Seeking Safety was beneficial as demonstrated by a reduction in symptoms related to intergenerational trauma and SUD.
- There is a need for future studies to help understand the impact of Aboriginal practices combined with other Western treatment models.

In Conclusion

- My participation in this research process and as a PhD Student encouraged & humbled me to dedicate my life to this healing work. As Marshall and Barlett (2009) so eloquently stated, “Two-eyed seeing signifies learning: to see from one eye with the strengths of Indigenous knowledge and ways of knowing, and from the other eye with the strengths of Western (or Eurocentric or mainstream) knowledge and ways of knowing, and to use both of these eyes together for the benefit of all”



PUBLISHED PAPERS

- Marsh T.N. et al 2016 Indigenous Healing and Seeking Safety: A Blended Implementation Project for Intergenerational Trauma and Substance Use Disorders. *The International Indigenous Policy Journal*, 7,, epub ahead of print.
- Marsh, T. N. et.al (2015). Blending Aboriginal and Western healing methods to treat intergenerational trauma with substance use disorder in Aboriginal peoples who live in Northeastern Ontario, Canada. *Harm reduction journal*, 12(1), 14-25.
- Marsh, T. N., Cote-Meek, S., Toulouse, P., Najavits, L. M., & Young, N. L. (2015). The Application of Two-Eyed Seeing Decolonizing Methodology in Qualitative and Quantitative Research for the Treatment of Intergenerational Trauma and Substance Use Disorders. *International Journal of Qualitative Methods*, 14(5), 1-13.