

High Suicide among Inuits of Canada- Who is caring for Whom ?

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Introduction

Inuit suicide is the most significant mental health issue in Nunavut.

Nunavut

Nunavut



NUNAVUT

Nunavut is the largest, northernmost and newest [territory](#) of [Canada](#). It was separated officially from the [Northwest Territories](#) on April 1, 1999.

Nunavut is both the least populous and the largest in area of the provinces and territories of Canada.

NUNAVUT

- One of the most remote, sparsely settled regions in the world, it has a population of 37,000, mostly Inuit, spread over land area the size of Western Europe, Mexico, or Indonesia.

A View from my window in Igloolik, Nunavut.



NUNAVUT

- ◆ Nunavut is the northernmost permanently inhabited place in the world, the major language of the people is INUKTUTUIT.
- ◆ It is the only geo-political region of Canada that is not connected to the rest of North America by highway.

Community Event in Igloolik, Nunavut



Prevalence

- Suicide is among the 10 leading causes of death in Canada.
- Inuit suicide rates are more than 11 times higher than the Canadian rate. (Health Canada).
- 83% of these are people under 30 years of age.

Prevalence

- Nunavut Inuit children and teenagers are 30 times as likely to die from suicide, as those in the rest of Canada.
- Suicide represented approximately 50% of all deaths amongst Nunavut Inuits, compared to 10% of deaths of young people in general population (Oliver et al. 2012).

Prevalence

- Suicide among Inuits in Nunavut occurs at a rate of about 110 deaths per 100 000 people, which is about 10 times the rate in the rest of Canada (11 per 100 000).
- Among young men aged 15 to 24 in Nunavut, the suicide rate is more than 500 per 100 000 — **close to 50 times the national rate for this group.**

Prevalence

- In 2012, there were 27 completed suicides by Inuit in Nunavut, which has a population of about 34 000.
- In 2013, there were 21 suicides by the month of July.

Inuits Suicide and Mental illness

In the suicide group, only 12.5% had taken psychiatric medication in the past.

Most (89%) had never taken medication for a mental illness and only 17% had been hospitalized for mental health problems.

(Chachamovich et al. 2013)

Contributing factors

Historic Phenomenon- Elderly Inuit voluntarily abandoning their lives to the elements so as not to burden their surviving relatives.

Social explanations - Social change and Social disruption

The impact of colonial relations of ruling has much to do with the current problem

Contributing Factors

- **Low Inuit inuusittiaqarniq (self-esteem)** is an important factor in Inuit suicide, but rather than a psychological problem, has its roots in a history of colonialism, paternalism and historical events.
- **Interpersonal and socio-environmental stressors** were found to be unusually extensive and the primary precipitators of psychiatric crises such as suicide attempts.
- **Negative health determinants** such as unemployment, overcrowding, domestic violence, substance abuse, and legal charges are also prevalent.

Contributing Factors

- ◆ **Intergenerational gap**-leading to confusion, apathy to cultural and spiritual elements, poor or no parental skills , poor coping skills.
- ◆ **Trauma and re-traumatisation**- Multiple/cluster suicides.
- ◆ **Emotional capacity**- mood expression and regulation; impulsivity and anger management issues.

Specific to working with the Family of a person who completed suicide

holistic care



family centered

Considerations

- ✓ It is a challenge starting conversation with a family, who have just lost a member to Suicide.
- ✓ As a nurse, **self-awareness** is the first most important element, being aware of our feelings around death and dying is key to helping this family. Our personal and professional experiences do shape our attitude and responses towards death and dying.
- ✓ As a direct result of the increasing number of young people dying by suicide, more people are bereaved, with up to six people immediately affected after each suicide .

(Clark et al. 2000)



Nursing Diagnosis

Compromised family coping

related to

grief,

as evidenced by

Recent loss of a family member to Suicide

THERAPEUTIC INTERVENTIONS

- ◆ **Establish a positive working relationship with the family using interpersonal skills. This will build trust, reduce feelings of isolation, and facilitate coping.**
- ◆ **Provide a platform for family members to voice their concerns, feelings, expectations and fears regarding the suicide event.**
- ◆ **The nurse will relay feelings of understanding, acceptance, and support for the family.**

THERAPEUTIC INTERVENTIONS

- ◆ **Empathy-** The key to an empathetic response lies in acknowledging the emotions and reactions of the patient and family during this painful discussion and responding to them in an appropriate manner (Kaplan, 2010). Statements such as “I wish the situation was better” convey empathy.
- ◆ **The family will be encouraged to explore and identify their own strengths and weaknesses that are brought to the group. This will allow for better understanding of what roles and supports they can best provide within the context of this traumatic event.**

THERAPEUTIC INTERVENTIONS

- ◆ Provide ongoing assistance and to support the family in managing their grief.
- ◆ Provide encouragement for the family to seek out information regarding the illness as well as that pertaining to increasing personal coping skills.
- ◆ The nurse will encourage family members to communicate their personal feelings, thoughts and beliefs with other members of the family. This will facilitate an open dialogue between members and make the intra familial support stronger.

Therapeutic intervention

- ◆ **Acknowledge the individual feelings of each member, and provide empathy and support as needed. Allow the family members to express their feelings and concerns, and validate their importance**
- ◆ **Act as a knowledgeable liaison between family members and other community agencies to explain and clarify different aspects of the event.**

Therapeutic intervention

Psychological autopsy interviews approach.

- ◆ Apart from reconstructing the circumstances that surrounded the suicidal death, psychological autopsy interviews also have an impact on the mourning process of those close to the deceased . They inadvertently have a therapeutic value; they give the participants an opportunity to express their plight, to derive support, to have a compassionate connection with others, and, they promote self-understanding (Kizza et al. 2011).

Therapeutic intervention

Intervention for Children-

Child survivors of parental suicide are left with the challenge not only of trying to understand why their parents died by suicide, but also of coping with the social stigma of a suicidal death (Kizza et al. 2011).

- ◆ Encourage them to keep talking about the experience
- ◆ Alert parents about potential regression in behaviour.

✓ Medications

Avoid numbing the Grief process initiation.

Catastrophic reaction- Lorazepam

Sleep- PRN Trazodone

Ceremonial outfit of Coppermine Inuits
(Kugluktuk, Nunavut)..



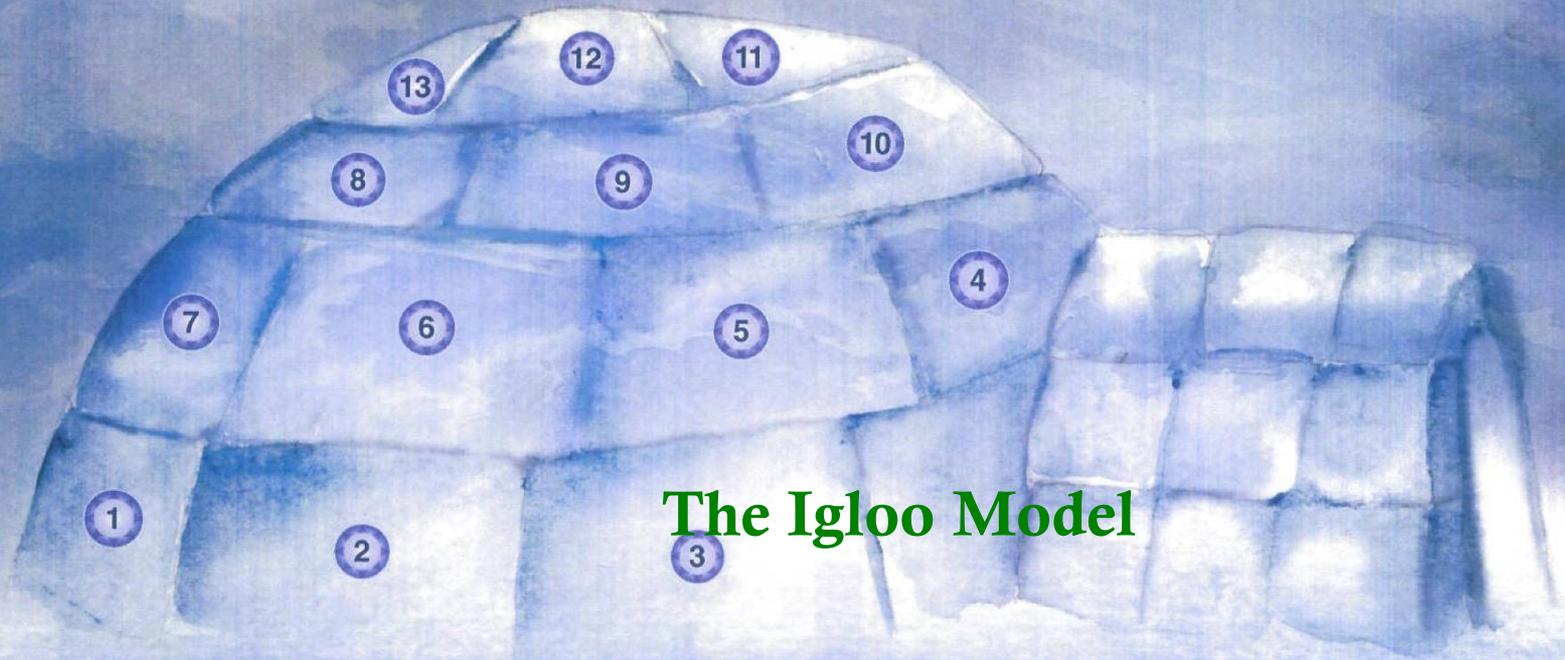
Therapeutic Intervention.

The Igloo Model (Culture appropriate intervention)

Using the Igloo model, the family will be introduced to start looking at healthy lifestyles. Iglu is the traditional home of the Inuits before the advent of southern Canada influence.

The model uses the basics of building an Iglu to proffer a simple understanding of attaining healthy lifestyle and stick to it. An Iglu is built one block at time from the foundation; this family need to be supported to own every progress they make in the process. The strength of this model is that it empowers individuals to believe in self (Arnakaq, 2010). This is used in the continuum of grief work with the family.

Outside of the Iglu – Foundation of the Iglu



The Igloo Model

The snow blocks around the outside of the iglu means to develop a healthy lifestyle.

- | | | | | | | | | | |
|---|----------------------------|---|-------------------------|---|-----------------|----|-------------------------|----|-------------------|
| 1 | Becoming Aware of Self | 4 | Being Patient with Self | 7 | Self-Assessment | 10 | Knowing One's Abilities | 13 | Believing in Self |
| 2 | Knowing When to Limit Self | 5 | Understanding Self | 8 | Self-Love | 11 | Self-Confidence | | |
| 3 | Protecting Self | 6 | Speaking for Self | 9 | Self-Gratitude | 12 | Being a Friend to Self | | |

Conclusion

Dealing with the family following suicide attempt and completion is a challenging and seemingly unfeasible life event for clients and their families to experience.

Suicide in the Arctic appear deeply interwoven with interpersonal, socioeconomic, and societal changes; effective community mental health services must address a broad spectrum of psychosocial issues beyond the medical model.



Some References

Arnakaq, M. (2010). *Expanding ones environment for a health lifestyle.* Pangnirtung, NU.

Author

Government of Nunavut (2010). *Nunavut Suicide Prevention Strategy.* Government of Nunavut.

Kizza, D. Hjelmeiland, H. Kinyanda, E. Knizek L. (2011). Qualitative psychological autopsy interviews on suicide in post-conflict northern Uganda: The participants' perceptions. *Omega* (63) 3 235-254.

Rowe Kaakinen, J., Padgett Coehlo, D., Steele, R., Tabacco, A., & Harmon Hanson, S. (2014). *Family health care nursing: Theory, practice & research. (5th ed.).* Philadelphia: FA Davis.

.Chilling out on a
warm day...



QUESTIONS ???

💧 Thank you...