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## First Nations Youths' Experiences with Wellness: A Four Directions Approach

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A thesis submitted in partial fulfillment of the requirements for the Master of Education degree in Psychology

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FIRST NATIONS YOUTHS' EXPERIENCES WITH WELLNESS: A FOUR  
DIRECTIONS APPROACH

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Approach

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by

Jamie L. Warren

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School of Graduate and Postdoctoral Studies

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## **Abstract**

First Nations youth are a growing population at risk for multiple outcomes that affect their well-being. The effects of colonization and the residential school legacy continue to impact First Nations communities today, creating a cycle of intergenerational trauma to affect the next seven generations. As First Nations youth are at a social and economic disadvantage for maintaining balance in well-being, the purpose of this study was to identify through the Medicine Wheel teachings 1) what youth saw as contributors to well-being, 2) their vision for well-being, and 3) ways to achieve their vision. Using a qualitative approach, the results described the reality of wellness amongst First Nations youth in a holistic, cultural view. Face-to-face interviews were conducted with five First Nations youth in a rural First Nations community in Northern Ontario. Five themes emerged that were related to their experiences with wellness, including Balance Strategies and Challenges, Coping Strategies, Emotional Balance, Worldview, and Motivation, using a qualitative content analysis procedure. It was determined that the voices of First Nations youth are powerful, significant, and must be listened to. If an imbalance continues to affect the lives of First Nations youth, the imbalance will also be reflected in Canadian society. Further initiatives are needed to support and empower our First Nations youth on their journey to becoming tomorrow's leaders.

**Keywords:** First Nations Youth, Medicine Wheel, Cultural Wellness, Holistic Wellness

### **Dedication**

This research is dedicated to all the First Nations youth who are not afraid to voice their thoughts, feelings, and concerns and stand up for themselves, their families, and their communities. Meegwetch for your strength and courage.

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First, I would like to thank the youth for sharing their experiences and answering my many questions. I feel incredibly honoured to have been given the unique opportunity to have this experience and bear witness to your stories. This study would not have been possible without you.

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## Chapter 1 – Introduction

First Nations youth are a growing population at risk for multiple outcomes that affect their well-being. According to the most recent census (Statistics Canada, 2006), there has been a 25.4% increase from 2001 of First Nations youth ages 15-24. They are younger, on average, than non-First Nations. Indeed, almost half are under 25 years compared to the 32% of the non-First Nations population under 25. They have lower school attendance and earn less than non-First Nations people. First Nations youth are three times more likely to be involved with child welfare, four times more likely to commit suicide, and seven times more likely to be incarcerated than non-First Nations youth (Castellano, 2008).

The purpose of this study is to identify, through the Medicine Wheel teachings, 1) what youth see as the contributors to well-being, 2) their vision for well-being, and 3) ways to achieve their vision. The Medicine Wheel was selected during the construction of research methodology because the researcher's own personal and professional experience with this symbol and its cultural relevance and resonance with the experiences of First Nations youth in the community that is the focus for this study

A cultural explanation of the Medicine Wheel is provided. The history of First Nations people can be described through the experience and impact of colonization on the population today. In addition, the challenges of First Nations youth today as well as challenges for the researcher integrating Western and traditional knowledge are presented. Previous research on First Nations youth with respect to wellness and the Medicine Wheel is reviewed and critiqued.

## **Medicine Wheel**

The Medicine Wheel is a symbol that represents many First Nations worldviews. It represents both a holistic way of living and healing. It is in the shape of a wheel to represent cycles of life. Nothing ever begins or ends because everything is continuous and that is what creates life's balance. The cycles can represent life stages (child, youth, adult, Elder), seasons (spring, summer, autumn, winter), and days (morning, afternoon, evening, night).

It is difficult to find a single explanation for what each of the four sides of the Medicine Wheel represent as each community has its own interpretation. However, in the present context, the Medicine Wheel represents wellness and is divided into the physical, emotional, intellectual, and spiritual. Each dimension is connected to the self, but can be used to represent family and community. When one side of the Medicine Wheel is not working, the other aspects are also affected and create imbalance. Balance among the dimensions is what Hart (2003) refers to as "the good life" of "well-being." This is a crucial component of how First Nations view health and well-being.

The Medicine Wheel is used to help guide individuals to an understanding of where life has become unbalanced and to suggest a path for them to achieve balance (Waldrum, Innes, Kaweski, & Redman, 2008). Identifying and acknowledging the imbalance that exists in their lives involves addressing each of the four dimensions (Chansonneuve, 2007). Individuals are encouraged not only to see their own lives through it, but to seek their own wheel for family and community wellness (Waldrum et al., 2008). For example, the physical side may identify health problems and bodily effects of substance use, the mental side with negative thinking patterns, the emotional side for



lack of self-confidence and self-worth, and the spiritual side with little or no connections to the community. Therefore, the Wheel acts as a functional and flexible tool for helping First Nations people understand visually as well as conceptually how to lead a balanced and healthy lifestyle (Waldrum et al., 2008).

### **History and Colonization**

First Nations people have lived in North America long before European contact, where a rich culture of traditional and spiritual practices existed amongst a myriad of bands and tribes. Historical documents depict First Nations populations as remaining in good health well before the time of contact with European explorers (Royal Commission on Aboriginal Peoples [RCAP], 1996). The traditional wisdom and knowledge of the land passed down by Elders acted as an essential resource to community health and well-being. However, the arrival of European settlers marked a series of events that led to the deterioration of First Nations people and their well-being.

The mere arrival of the Europeans created an epidemic of deaths of First Nations people. Many First Nations people became ill and died from infectious diseases such as influenza, polio, measles, and smallpox (Health Council of Canada, 2005). First Nations people did not have any exposure to these diseases prior to European contact and thus could not protect themselves due to their lack of immunity.

First Nations people relied on the land to maintain community sustainability.

Mussell (2008) wrote the following:

“Their food supplies came from the rivers, forests and meadows, and materials for clothing and shelter came from the trees and animals. They lived in collectives of families that shared responsibilities for hunting, ensuring shelter needs were met, preparing and preserving food, and raising children and taking care of the Elderly.” (p. 4).

The impact of early colonization restricted land and resources, limiting self-sufficiency and increasing dependence on government. Meanwhile, the rate of European immigration continued to increase. By 1812 immigrants outnumbered First Nations people in Upper Canada 10 to 1 (RCAP, 1996). The number of European immigrants entering North America allowed colonists to rapidly increase their numbers over First Nations people.

Viewing First Nations people as “savage” meant they were also incapable of governing themselves. Traditional practices effectively served spiritual, social, personal, and economic tasks for many generations and were essential to the cultural survival of communities (Thira, 2006). Government legislation was introduced to control the First Nations population as well as their traditional practices. Thira (2006) argues that the goal of legislation was to control and assimilate the “Indians” into mainstream society. The creation of the Department of Indian Affairs took on this mandate.

As the government gained more control over First Nations populations, communities were relocated to confined areas of land known as “reserves.” The idea of the reserves was to not only designate “Indian land” but also to throw off the economy of each community because First Nations communities lived off of the land. The forced relocation of communities created impoverished conditions. These conditions still exist on reserves today, often being described as “third world” (Blackstock, 2011).

One of the most devastating “solutions” to the “Indian problem” was the residential school legacy. As First Nations adults were not as susceptible to the effects of assimilation, the federal government turned their attention to First Nations children. Indian residential schools were established by the federal government and run by Christian missionaries. These schools were intended to civilize and convert First Nations

children to Christianity as well as prepare them for employment as a cheap source of labour (Furness, 1995). Children as young as three years old were taken away from their families and communities and subjected to severe physical, emotional, and sexual abuse. In 1920, residential school attendance became compulsory by law (First Nations Leadership Council, 2008). By 1931, the residential school system had peaked with over eighty schools that were active across Canada. The result of the residential school system was widespread for First Nations communities across Canada, including the loss of family, culture and language, identity and social roles, parenting and life skills, self-esteem and spirit, and value from internalized racism (Thira, 2006).

### **Impact of Colonization on First Nations Today**

An interview with a community member revealed that First Nations beliefs recognize consequences of present-day actions on the next seven generations (J. Soloman, personal communication, June 29, 2011). The combined impact of loss of life, land, and children, are reflected in the intergenerational trauma perpetuated through the legacy and reality of colonization. The Aboriginal Healing Foundation (1999) defines intergenerational trauma as “when the effects of trauma are not resolved in one generation” (Aboriginal Healing Foundation [AHF], 1999). The effects of colonization and multiple losses have left a cycle of intergenerational trauma (Bombay, Matheson, & Anisman, 2009; Czyzewski, 2011; Menzies, 2010). First Nations youth are described as survivors of the impact of intergenerational trauma through re-victimization (Chansonneuve, 2005), amounting to a range of negative outcomes that affect themselves as well as their families, and communities.

## **Challenges Faced By First Nations Youth**

Today, the third and fourth generations are affected (J. Soloman, personal communication, June 29, 2011). It will take another three to four generations for healing from the trauma to begin to subside. As youth represent the next generations, they will continue to be affected by intergenerational trauma. Clarkson, Morrissette, and Regallet (1992) summarize these circumstances for First Nations youth:

“These indicators reflect the symptoms of underdevelopment facing Aboriginal people which have been shaped by internal colonialism, institutional racism, and cultural disintegration, and despite increased awareness of the importance of culture and identity, conventional services and programs have been slow to incorporate more than a tokenistic appreciation of these issues. Aboriginal youth are particularly disempowered because they are disorganized and do not have an effective mechanism to represent their own understanding of common needs, problems, and preferred solutions.” (p.42)

One of the components of healing involves re-learning and re-integration of First Nations culture and its teachings. It has been noted (Hunter, Logan, Goulet, & Barton, 2006) that healing for First Nations youth involves: 1) following a cultural path by regaining culture through the use of healing traditions; 2) gaining balance in the four realms of spiritual, emotional, mental, and physical health; and 3) sharing in the circle of life. Confidence and balance are also essential ingredients for activism to promote social and political change (Clarkson, Morrissette, & Regallet, 1992).

## **Summary**

First Nations people continue to experience the effects of intergenerational trauma as a result of multiple losses at individual, family, and community levels. . First Nations youth continue to feel this and are at risk for multiple negative outcomes that create imbalance in their lives. The Medicine Wheel is a sacred, culturally-relevant tool that can not only identify where imbalance lies, but how to achieve balance. The purpose of the

present study is to identify, through the Medicine Wheel teachings, 1) what youth see as the contributors to well-being, 2) their vision for well-being, and 3) ways to achieve their vision.

This research serves to benefit a number of areas, including future research, counselling, and policy-making relevant to First Nations youth and communities. First, most research with First Nations peoples has them as “subjects” studied by people outside of the community and most of the work is from a deficit perspective (i.e., Westernized views of pathology), as opposed to culturally based views of wellness (Merlens, 2009; Ponting & Voyageur, 2001). Merlens (2009) argues that “when the deficit perspective is used to frame a group as a “problem” with barriers, then the strengths in that community are not as likely to be recognized” (p.17). The present study challenges this through the perspective of a First Nations researcher, using a Western research method while using a sacred, culturally-relevant, and widely recognized symbol of First Nations wellness as a foundation.

Second, it is essential to have cultural awareness to work effectively with First Nations people in counselling. Not only is understanding First Nations history important, but it is also critical to understand the role that culture plays in First Nations people today. Youth who are often seen as “struggling” need to be seen as capable of finding balance and taking their place as future leaders. This research promotes the Medicine Wheel as a culturally-specific way to empower youth to maintain wellness through balance.

Third, youth are future leaders – they should be listened to, helped to see their strengths, and have their confidence promoted to take their rightful place as future

leaders. With the increasing birth rate and expected baby boom of First Nations children, First Nations people are a growing population. Hull (2008) predicts that by the year 2026, the Aboriginal population (that is; First Nations, Inuit, and Métis) ages 15 to 29 will increase by 47% since 2001, while the general Canadian population within this age group is projected to peak in about 2016 and is expected to remain static. By that time, First Nations youth (as well as Inuit and Métis youth) will not only have the potential to make a major contribution on the Canadian economy but also an opportunity to become active participants in shaping tomorrow's society. However, the economic and social disadvantages that First Nations youth currently face create an imbalance in their own lives will also create an imbalance in society if wellness does not become a priority.

### **Structure of this Thesis**

Chapter 2 defines and describes concepts related to the First Nations population and is followed by literature that compares First Nations youth and the general Canadian population on current challenges including suicide, physical health problems, substance use, education status, and the justice system. These factors were chosen to demonstrate the wide gap between First Nations youth as compared to the general Canadian population (Castellano, 2008). Literature describing First Nations youth and their relationship with wellness is also provided. Chapter 3, the methodology is described, including engagement process, data collection, participants, 'decolonizing' methodology, design, and analysis. Chapter 4 is a description of the results from interviews with the participants and Chapter 5 compares and contrasts the participants' experiences with the literature to identify similarities and differences.

## Chapter 2 – Literature Review

This chapter reviews scholarly literature about First Nations communities, imbalance, and wellness among youth. The first section provides basic descriptions of foundational concepts and is followed in a second section with a comparison between First Nations youth and the general Canadian population in relation to contemporary challenges associated with imbalance, including suicide, physical health problems, substance use, education status, and justice system issues. The third section focuses on themes specifically related to First Nations wellness. Eight major themes emerged from a review of the literature pertaining to First Nations youths' wellbeing: 1) their experiences with wellness, 2) their understanding of the Medicine Wheel, 3) their support networks, including family, culture, community, and education, 4) collectivist views, 5) individual and collective control, 6) cultural continuity, 7) cultural knowledge, and 8) personal identity.

### **Foundational Concepts**

It is important to describe some fundamental issues in ways that frame the present study. These topics include First Nations, youth, reserve, north, treaties, the Royal Commission, diversity and collectivism, in order to represent contemporary challenges faced and wellness promoted by First Nations youth for First Nations youth.

***First Nations.*** The term “Aboriginal” is a collective name for the original people of North America (Aboriginal Affairs and Northern Development Canada [AANDC], 2010b). The Canadian constitution recognizes three groups of Aboriginal people: Indian, Métis, and Inuit. Registered Indians are individuals recognized by the federal government with registration under the Indian Act and also referred to as having “status” (AANDC, 2010b). Individuals without “status” refer to those who identify as Aboriginal but are not

entitled to registration pursuant to the Indian Act (AANDC, 2010b). The term “First Nations” became used in the 1970s to replace the word “Indian” (AANDC, 2010b). First Nations can refer to individuals with and without status. Although it is not a legal term, First Nations is politically correct and the term used throughout.

Métis refers to people of mixed First Nations and European ancestry who identify themselves as Métis, and distinct from First Nations people, Inuit or non-Aboriginal people (AANDC, 2010b). Métis have a unique culture with diverse European and indigenous ancestral origins (AANDC, 2010b). Inuit people also have unique cultures and originally resided in the north. Today, many reside in Nunavut, Northwest Territories, Northern Quebec, and Northern Labrador (AANDC, 2010b).

**Youth.** The Western definition of youth is seen as the period between childhood and adulthood (United Nations Educational, Scientific and Cultural Organization, 2013). In Canada, a youth becomes an adult when she or he has reached the age of majority, which is either 18 or 19 years of age as determined by each province and territory.

However, First Nations culture has a more fluid view on what defines a youth. The Medicine Wheel acknowledges the youth stage as one of the life stages of the cycle of life. Although each community has its own beliefs and practices about each life stage, this study defines a “youth” based on the researcher’s Cree teachings. Chronological age is a solid indicator of what life stage an individual is at. For example, a child becomes a youth around age 13, a youth becomes a young adult at age 21, and a young adult becomes an adult at age 30 (L. Martin, personal communication, October 3, 2011). However, Cree teachings posit that ceremonies and teachings are much more important than age (L. Martin, personal communication, October 3, 2011). It is largely dependent



on the maturity of the individual to undergo the preparations, rites of passages, and ceremonies required before they can enter their next life stage.

**Reserve.** In comparison to First Nations people who live off reserve, the on-reserve population live on specific tracts of land designated by the Crown and set apart specifically “for the use and benefit of an Indian band” (AANDC, 2010b). Although conditions within and between reserve communities and non-reserve communities vary considerably, these conditions can be a strong predictor of quality of life. The overall quality of life for off-reserve First Nations people was better than on-reserve First Nations people (Carter, Polevychok, Sargent, & Seguire, 2004).

**North.** First Nations people in the north are often challenged by poorer economic and social conditions than the south. In the north, the site of the present study, many First Nations communities remain isolated, accessible only by winter roads over frozen lakes or by flying on small aircraft. A recent report described the deplorable conditions that are a reality for many children and families in these communities (Silversides, 2007). Many families live well below the poverty line and social assistance is their sole source of income (North-South Partnership, 2007a). It is a challenge for many families to afford groceries, as the cost is three to four times higher than it is in the south. Many children go hungry and are not adequately clothed for the northern temperatures. The education facilities are similarly inadequate as schools lack basic necessities such as textbooks. Housing shortages and poor quality housing are a common problem. For example, once report noted that 18 people were sharing a small two-bedroom house (North-South Partnership, 2007b). In addition, many houses have serious mould and airborne problems due to poor construction and inability to withstand the weather conditions. The histories

of oppression and government dependency have eroded traditional strengths, culture, and dignity in some northern First Nations communities (Brubacher, 2007; Silversides, 2007).

***Treaties.*** Treaties are formal agreements made between First Nations people and Europeans that set out promises, obligations, and benefits for both parties (AANDC, 2010a). Many of the earliest agreements were about maintaining a peaceful relationship, but ultimately they were signed to define the respective rights of First Nations people and governments to use and enjoy the lands that First Nations people traditionally occupied (Indian and Northern Affairs Canada [INAC], 2000). Historic treaties were made between 1701 and 1923 (INAC, 2000). Over 500 treaties exist between governments and over half of all Aboriginal people across Canada (Brown & Hannis, 2011). There is significance to treaties among First Nations communities. How the government and community interpret relevant treaties influences the future of the relationship between First Nations and the rest of Canada.

***Royal Commission.*** The Royal Commission on Aboriginal Peoples (RCAP) was established in 1991 to investigate the evolution of the relationship among Aboriginal people, the Canadian government, and Canadian society as a whole (RCAP, 1996). After four years of conducting public hearings, visiting communities, consulting numerous experts, commissioning multiple research studies, and reviewing previous reports, a final report was released in 1996 (Brown & Hannis, 2011). This report proposed four principles – recognition, respect, sharing, and responsibility – for the development of a new relationship between Aboriginal people, the Canadian government, and Canadian society. One of the central conclusions was that “the main policy direction, pursued for over 150 years, first by colonial then by Canadian governments, has been wrong” (p.x)

and “Aboriginal peoples must have room to exercise their autonomy and structure their solutions” (RCAP, 1996).

One of the goals of RCAP (1996) was to “close the economic gap between Aboriginal people and non-Aboriginal people by 50% and improve social conditions in the next 20 years.” However, despite the extensive work that went into the Commission and its efforts, there remains an increasing gap in social and economic conditions between First Nations communities and non-Aboriginal people and no sustained investment by government in meeting basic needs of First Nations communities by honouring treaties that would address key determinants of health and well-being (Assembly of First Nations, 2006).

***Diversity.*** A great deal of diversity exists amongst First Nations people. There are over 600 First Nations communities in Canada with differences between communities size, language, geographic area and spiritual practices as well as ancestral histories.

There are distinctive differences in traditions and practices. Each practice has its own definitions, categories, and tools, coming from a particular worldview (Heilbron & Julius-Guttman, 2000). Some communities are united in their beliefs, values, and traditions, while others reflect greater diversity; the values may be traditional ways, more Western ways (e.g., Christianity), or a combination of both (Warner, 2003). The traditions and customs in one community cannot be necessarily generalized to all First Nations people (Heilbron & Julius-Guttman, 2000), and therefore, there is a need to remain open in not only understanding First Nations worldview, but also the histories, traditions, and current issues that affect different First Nations communities today.

***Collectivism.*** It is important to highlight collectivism as a central cultural and social value within many First Nations communities. Collectivism refers to “shared attitudes, beliefs, norms, role and self definitions, and values of members of each culture organized around a theme” (Triandis, 1996, p.407). In relation to First Nations people, cooperation, emotional attachment to others, concern with others’ opinions, and attention to family and relatives are part of collectivist values (Mussell, Cardiff, & White, 2004). Collectivism reflects the interconnectedness and holistic nature of First Nations communities. The strength of the community is based on relationships between individuals. Achieving and maintaining balance and physical, emotional, mental, and spiritual well-being needs to be done both individually and collectively.

In the present study, the term First Nations is used to identify youth and their position in the Canadian constitution. Experiences living on reserve as well as in the north, and with membership in Bands affected by historical and current treaty negotiations have a significant effect on their lives. The Royal Commission (RCAP) was clear about different life chances for Aboriginal versus non-Aboriginal people, and in particular, First Nations people in relation to social conditions and income. Despite the diversity that exists between and within First Nations communities, there are frequent mentions in the literature of the importance of collectivism in history of Aboriginal people that remains prominent in the lives of many First Nations youth today. However, challenges rooted in colonization continue to be felt across the present generation of First Nations youth. These challenges are described in the following section of this literature review.

## **Challenges Faced by First Nations Youth**

First Nations youth are at a disadvantage for maintaining balance and wellness relative to non-First Nations youth. It is important to review factors that put First Nations youth at a disadvantage and how they compare to the general population to contextualize the great strengths they possess. The factors to be explored in this section include suicide, physical health, substance use, education, and the justice system.

***Suicide.*** The mortality rate among First Nations youth is three times higher than that of non-First Nations youth (Guimond & Cooke, 2008). Over a third of all deaths among First Nations youth are attributable to suicide (Health Canada, 2003). The rate of suicide is disproportionately high amongst First Nations youth (Chandler & Lalonde, 1998; Lalonde, 2005; Kroes, 2008). In comparison to non-First Nations youth, the suicide rate is five to seven times higher for First Nations youth (Health Canada, 2006; Kirmayer, Brass, Holton, Paul, Simpson, & Tait, 2007).

Risk factors for suicide among First Nations youth are similar to those for suicide in the general population of young people, including depression, hopelessness, low self-esteem, negative self-concept, substance use (especially alcohol), suicide of a family member or a friend, history of physical or sexual abuse, family violence, unsupportive and neglectful parents, poor peer relationships or social isolation, and poor performance in school (Kirmayer et al., 2007). However, for First Nations youth additional cultural issues also become risk factors, including acculturation stress and marginalization (Kirmayer et al., 2007). Many First Nations youth are perceived or perceive themselves to be marginalized in relation to mainstream society as well as within their own communities (Advisory Group on Suicide Prevention, 2003). A sense of isolation

experienced by First Nations youth is profoundly greater than non-First Nations youth and caused by a lack of existing cultural practices and ties to the community (Advisory Group on Suicide Prevention, 2003).

When a suicide occurs within a First Nations community, a powerful ripple effect occurs as First Nations communities are not only small in population, but typically collectivist in nature. Therefore, every suicide has a direct effect on community members and accounts for a tendency toward clusters of suicides (Advisory Group on Suicide Prevention, 2003).

***Physical Health Problems.*** First Nations youth living on reserve experience a number of chronic or prolonged health conditions. Some of the most common long-term health conditions include asthma (14.6%), allergies (12.2%), chronic ear infections or ear problems (9.2%), chronic bronchitis (3.6%), and learning disability (2.9%) (First Nations Information Governance Committee, 2003). The prevalence of these conditions is higher for First Nations youth than it is for all Canadian youth (Reading & Wien, 2009). Some of these conditions are triggered by foreign substances in the environment, such as tobacco smoke, smog, and mould (Reading & Wien, 2009). However, this is an unfortunate reality for many First Nations children as housing conditions and standards of living are often poor. In addition, a lack of exercise and poor diet has been associated with an increasing rate of Type II Diabetes amongst First Nations youth (Campbell, 2002; Hanley, Harris, Gittelsohn, Wolever, Saksvig, & Zinman, 2000; Judd, Griffith, & Faustman, 2004).

***Substance Use.*** Substance use is higher among First Nations youth than among non-First Nations youth (Collaborative Community Health Research Centre, 2002;

Erickson & Butters, 2005; Health Canada, 2001; Van Der Woerd, Dixon, McDiarmid, Chittenden, & Murphy, 2005). First Nations youth are likely to begin using substances such as alcohol, illicit drugs and solvents, as well as tobacco at an earlier age (Collaborative Community Health Research Centre, 2002). They are at two to six times higher in risk for alcohol-related problems compared to non-First Nations youth (Tupker, 2004). In a 1998 survey, it was found that 51% of grade 7 to 12 First Nations students had been binge drinking in the past month compared with 43% of non-First Nations students (Reading, Kmetec, & Gideon, 2007).

First Nations youth are also more likely to use illicit drugs than non-First Nations youth (Tupker, 2004). As many as one in five First Nations youth use solvents (Tupker, 2004) and one-third of those who used solvents were under the age of 15 with more than half beginning before the age of 11 (Tupker, 2004). In addition, First Nations youth are more likely to experiment with cannabis, amphetamines, cocaine/crack, codeine, morphine, opiates, and heroin (First Nations Information Governance Committee, 2003; Reading, Kmetec, & Gideon, 2007).

Smoking is also highly prevalent among First Nations youth. Over half (54%) of youth between the ages of 11 and 19 years smoke (Canadian Paediatric Society, 1999). The prevalence rate is two times higher than non-First Nations youth (Reading & Allard, 1999). Compared to the general population, First Nations youth begin smoking earlier and have a higher frequency (Elton-Marshall, Leatherdale, & Burkhalter, 2011; First Nations Information Governance Committee, 2003; Hutchinson, Richardson, & Botorff, 2008). With smoking, the likelihood of using other substances such as alcohol and illicit drugs increases (Reading, Kmetec, & Gideon, 2007). In addition, First Nations youth

have also been more likely to experience regular exposure to second-hand smoke than non-First Nations youth (Elton-Marshall, Leatherdale, & Burkhalter, 2011).

***Education Status.*** There is a large gap between First Nations youth and non-First Nations youth in educational indicators. Compared to non-First Nations youth, First Nations youth have lower educational attainment (Guimond & Cooke, 2008). The early school leaver rate for First Nations youth is much higher than non-First Nations youth and in some samples, over 50% (Cardinal, 2004; Postl, Cook, & Moffat, 2010). Lower attainment and early leaving result in diminished literacy and employment opportunities as well as potential for poverty (Cardinal, 2004). In addition, lower educational achievement as a youth is associated with poorer health outcomes, challenges in achieving desired levels of education, and limited access to social support networks as an adult (Postl, Cook, & Moffat, 2010).

In a large study by Health Canada (2009) almost half (49.7%) of on-reserve First Nations youth aged 20 years did not complete high school, compared to 12.0% in the general population. However, the youth in their study were more likely to be in high school at 20 years of age and tended to take longer to complete than the general population (Health Canada, 2009). It was noted that physical and mental health challenges functioned as obstacles for youth to realize the most from their education (Reading & Wien, 2009). In addition, the educational system's responsiveness to diversity and equity issues had an impact on the quality of education received and therefore, on youths' educational potential being realized (Reading & Wien, 2009).

Learning disabilities are another frequently experienced challenge that have a significant effect on educational achievement and attainment. Learning problems become



even more pronounced when additional health problems are present. For example, having one additional health condition magnifies the effect of learning problems at school (First Nations Information Governance Committee, 2003). Learning problems are also linked to residential school abuse. First Nations youth who are descendants of residential school survivors are more likely than other First Nations youth to have learning problems in school and take longer to complete grades (First Nations Information Governance Committee, 2003).

***Justice System.*** First Nations youth continue to be overrepresented in the justice system. First Nations youth are eight times more likely to be in custody than the general population (Latimer & Foss, 2004). In 2003, the overall incarceration rate for youth in Canada was 11.5 per 10,000 youth 12 to 17 years old and for First Nations youth in 64.5 per 10,000 compared to 8.2 per 10,000 for non-First Nations youth (Latimer & Foss, 2004). First Nations youth are also more likely to be incarcerated for more serious offences (Calverley, Cotter, & Halla, 2010; Latimer & Foss, 2004). In 2003, a greater proportion of First Nations youth were in custody for homicide or attempted homicide, serious assault, and serious sexual assault than non-First Nations youth. First Nations youth in custody also serve longer sentences than non-First Nations youth (Calverley, Cotter, & Halla, 2010; Canadian Criminal Justice Association, 2000; Latimer & Foss, 2004).

There is a great deal of evidence in the existing literature about the greater frequencies of life challenges and significant discrepancies between First Nations and non-First Nations youth in relation to mental and physical health, substance use and education, as well as justice system involvement. It is clear that First Nations youth are at

a disadvantage to achieve and maintain well-being. However, despite these challenges, First Nations youth engage and relate to wellness within their cultural context.

### **Wellness Among First Nations Youth**

This section describes First Nations youth and their experiences with wellness. It is crucial to recognize and build upon assets held by First Nations youth. In comparison to studies of problems, there are relatively few that attend to strengths. The literature was scanned again in a search for evidence of health and well-being for First Nations youth and eight areas emerged from that review. These areas included: First Nations youth engagement in wellness, relationship with the Medicine Wheel, multi-systemic approach, collectivism, cultural continuity, cultural knowledge, control and identity.

*Engaged in Wellness.* There is literature to suggest that First Nations youth are actively engaged in wellness practices and functioning in leadership roles that reflect their wellness (Blackstock, 2011). First Nations youth show interest in activities that help empower themselves and other youth (Blanchet-Cohen, McMillan, & Greenwood, 2011). They work from a broad approach to wellness that considers the links between culture, identity, and health (Blanchet-Cohen, McMillan, & Greenwood, 2011). Engaging in some wellness-related behaviours were important attributes of other wellness behaviours, such as making positive dietary changes, being more physically active, and quitting smoking and alcohol consumption (Elias, Leader, Sanderson, & O'Neil, 2000).

*Relationship with Medicine Wheel.* The Medicine Wheel is a culturally relevant symbol and tool for First Nations youth (Baskin, 2006; Moran & Bussey, 2007). Wellness is achieved by balancing the Medicine Wheel (Bergstrom, Cleary & Peacock, 2003; Elias, Leader, Sanderson & O'Neil, 2000). First Nations youth identify that

wellness is a concept that should be approached not just physically, but emotionally, spiritually, and mentally (Lowe & Struthers, 2001; RCAP, 1996; Struthers, Kass, Hill, Hodge, DeCora, & Geishirt-Cantrell, 2003). Many First Nations youth understand and are able to describe each directional aspect of the Medicine Wheel in their wellness (Isaak & Marchessault, 2008). Utilizing the Medicine Wheel within an educational context has also shown to be an effective way in which First Nations youth learn about wellness (Aho, Ackerman, Bointy, Cuch, Hindeland, Pinnow, et al., 2010).

***Multi-Systemic Approach.*** First Nations youth may directly link wellness with systems in their personal networks (Jones, 2004; Kirmayer, Brass & Tait, 2000). First Nations youth believe that self is connected to family, community, culture, and spirituality (Jones, 2004; Kirmayer, Brass & Tait, 2000). These act as protective factors against challenges and as a means of enhancing wellness (Strand & Peacock, 2003). There are four common systems: family, culture, community ties, and education.

Family has been identified as a key to maintaining wellness for First Nations youth (Jones, 2004; Kirmayer, Brass & Tait, 2000; Kral, 2003; LaFromboise, Hoyt, Oliver & Whitbeck, 2006). Many First Nations youth that feel they are able to talk and communicate with family members, including extended relatives, about their emotions and doing so is an essential part of maintaining wellness (Kral, 2003). Some youth find that the process of eating is the first connection that establishes a place and time for talking and communicating with family members (Kral, 2003). Wellness is associated with family relationships (Mussell, Cardiff & White, 2004; Stockburger, Parsa-Pajouh, de Leeuw & Greenwood, 2005; Williams & Mumtaz, 2007).

First Nations youth make a connection between culture and wellness (Chandler & Lalonde, 1998; Jones, 2004; Kirmayer, Brass & Tait, 2000; Kral, 2003; LaFromboise, Hoyt, Oliver & Whitbeck, 2006). This is especially prevalent at family and community levels (Chandler & Lalonde, 1998). Learning the ways of working with the land, such as hunting, camping, eating country food, and spending time with Elders are just some of the ways in which First Nations youth associate cultural connectedness with their well-being (Kirmayer, Brass & Tait, 2000; Kral, 2003). There is a fundamental need to acknowledge that wellness amongst First Nations youth is culturally shaped (Mussell, Cardiff & White, 2004) and it is important for First Nations youth to connect with their culture as a means of enhancing their personal wellness (Greenwood, 2005; Kirmayer, Brass & Tait, 2000).

Community is also associated with wellness for First Nations youth (Kirmayer, Brass & Tait, 2000; LaFromboise, Hoyt, Oliver & Whitbeck, 2006; Stockburger, Parsa-Pajouh, de Leeuw & Greenwood, 2005). Community wellness may be defined as a sense of belonging and pride that is cultivated and cherished by youth (Mussell, Cardiff & White, 2004). Community-based healing initiatives that identify and promote traditional sources of strength are meant to facilitate wellness (Mussell, Cardiff & White, 2004).

First Nations youth are able to understand their wellness within an educational context as well (Aho et al., 2010; Parrack & Preyde, 2009; Strand & Peacock, 2003). First Nations youth believe that wellness involves “healing of the mind;” that is, healing within a school environment where curriculum involves First Nations people and their history to be studied, respected, and validated (RCAP, 1996). A good education has been an effective way for some First Nations youth to learn about wellness (RCAP, 1996).

***Collectivism.*** A collectivist approach to wellness is more relevant and significant for First Nations youth than an individualist perspective (Mussel, Cardiff & White, 2004; Parrack & Preyde, 2009). First Nations youth find that wellness increases within a collectivist support network (Jones, 2004; Parrack & Preyde, 2009). This is especially true for First Nations youth as they learn about their community and culture through participation in community life (Greenwood, 2005) and by utilizing culture and traditions in counselling and mental health treatment (Jones, 2004). Much of a First Nations worldview embraces a collectivist approach to family and community (Kirmayer, Brass & Tait, 2000; Mussell, Cardiff & White, 2004). This is especially important for First Nations youth in their healing after a suicide attempt (Jones, 2004). Many First Nations youth prefer a collectivist approach to wellness. Holistic interventions are preferred and most effective (Jones, 2004; Mussell, Cardiff & White, 2004).

***Cultural Continuity.*** Rates of suicide are disproportionately high amongst First Nations youth (Chandler & Lalonde, 1998; Lalonde, 2005; Kroes, 2008) and have a traumatic impact on First Nations communities (Kral, 2003). Cultural continuity is a key within First Nations communities for enhancing wellness and simultaneously preventing youth suicide (Chandler & Lalonde, 1998; Kirmayer, Brass & Tait, 2000; Lalonde, 2005; RCAP, 1996). There is an inverse relationship between youth suicide and the community control in several important areas including: self-government, land claims, education, health services, cultural facilities, as well as police and fire services (Chandler & Lalonde, 1998). The more control and integration of these factors within a First Nations community, the fewer the youth suicides. This integration also contributes to self-

determination, self-sufficiency, healing, and reconciliation as a way of addressing suicide (Miller, 1995) and promoting wellness (Elias, Leader, Sanderson & O'Neil, 2000).

***Cultural Knowledge.*** Much of the literature highlights an inverse relationship between wellness and substance use amongst First Nations youth. Substance use tends to be associated with lower well-being (Greenwood, 2005; Tiessen, 2007; Tiessen, Taylor & Kirmayer, 2009). First Nations youth believe that learning and gaining knowledge about their culture will help prevent substance use (RCAP, 1996). This is especially true if First Nations youth are able to function well both within their home community and mainstream society (Kulis, Napoli & Marsiglia, 2002; Oetting & Beavais, 1990; Moran, Fleming, Somervell & Manson, 1999). First Nations youth have also reported traditional ways of being within their family and community as protective factors against substance use (Stockburger, Parsa-Pajouh, de Leeuw & Greenwood, 2005).

***Control.*** Perceived control over personal well-being is very important (Tiessen, 2007; Tiessen, Taylor & Kirmayer, 2009). When First Nations youth see themselves as having high individual internal (e.g., self) and external control (e.g., the Creator, others), they demonstrate more positive self-esteem and affect (Tiessen, 2007; Tiessen, Taylor & Kirmayer, 2009). First Nations youth that also perceive high group control (i.e. community control and ownership) with greater personal wellness (Chandler & Lalonde, 1998; Tiessen, 2007; Tiessen, Taylor & Kirmayer, 2009).

***Identity.*** Identity has been attributed to wellness by First Nations youth (Lavallee, 2008). Cultural identity is a significant factor in the well-being of First Nations youth (Kirmayer, Brass & Tait, 2000; Tiessen, 2007; Williams & Mumtaz, 2007). First Nations youth believe that regaining and rediscovering their culture is part of spiritual wellness

(RCAP, 1996). Wellness is being well-grounded and connected to culture as a means of developing good self-concept, a strong sense of direction, and tenacity (Moran, Fleming, Somervell, & Manson, 1999; Strand & Peacock, 2003). This includes feeling comfortable living in both worlds (i.e. the First Nations community and mainstream society), participation in cultural activities, and strong positive feelings of connection to community and family (Strand & Peacock, 2003).

### **Summary and Relationship to Present Study**

Developing a basic foundation of knowledge regarding First Nations youth requires an understanding of not only the historical effects of colonization, but also the products of colonization that continue today. This includes understanding the legal identifying title “First Nations,” distinction between living on reserve and off reserve, the geographic location of the First Nations band, and the diversity amongst sub-groups of First Nations people across Canada. It is also important to acknowledge the collectivist nature of First Nations to not only enhance the understanding of First Nations wellness and balance, but also to understand their relationships with the land and human beings.

Despite the challenges experienced by First Nations people as identified in the Royal Commission and subsequent research, First Nations youth have a relationship with wellness. They are actively engaged in wellness and their roles as determiners of their own wellness. Many First Nations youth have a clear and significant relationship with the Medicine Wheel. They directly link wellness multi-systemically, through family, community, culture, and spirituality. Approaching wellness collectively is significant and relevant for First Nations youth. First Nations youth who have high internal and external

control over their lives find balance and wellness. Development of a positive cultural identity is another contributor wellness for First Nations youth.

The methodologies of studies and reports in the existing literature do not capture significant points about First Nations youth wellness. First, few research studies have methodologies that take into account the perspectives of First Nations youth, especially cultural and holistic wellness. This is a key in understanding the way First Nations youth view and experience wellness. Second, much of the literature emphasizes the “problems” that currently exist amongst First Nations youth and little about their strengths. In the present study the topic is approached differently through a focus on wellness, from the perspectives of First Nations youth themselves.



### **Chapter 3 – Methodology**

Wellness among First Nations youth from a holistic, cultural view is important to explore. The purpose of this study was to identify, through the Medicine Wheel teachings, 1) what First Nations youth see as the contributors to well-being, 2) their vision for well-being, and 3) ways to achieve their vision. The Medicine Wheel represents a holistic view of balance and wellness. In this chapter, a description of qualitative research and a decolonizing approach to research are followed by an account of participant recruitment, interviews and analyses performed on the data before concluding with a description of how trustworthiness was promoted in the study.

#### **Qualitative Research**

In the study, a qualitative design was used to describe participants' experiences with wellness. According to Wang (2008), qualitative research involves understanding the complexity of people's lives by examining individual perspectives in context. Qualitative researchers are devoted to understanding the specifics of particular cases and embedding their research findings in the ever-changing world (Wang, 2008). A qualitative design allows the researcher to capture the participant's point of view. Although a variety of research tools can be used, this study uses interviews as its research tool, which allows the researcher to better understand wellness through the experiences of First Nations youth. The findings from the interviews used to observe certain phenomena are often "filtered" through the researcher's lenses of knowledge, language, values, and worldviews. Denzin and Lincoln (1998) described qualitative research as "an interactive process" shaped by the researcher's "personal history, biography, gender, social class, race and ethnicity, and those of the people in the settings" (p.4). In this study, a

qualitative design was appropriate because of the researcher's own personal history with the community where the data was collected.

Qualitative research practices are employed in various disciplines such as psychology, education, nursing, sociology, and anthropology. However, all qualitative research paradigms assume relativist ontology (there are multiple realities that are social and individually constructed), transactional epistemology (the knower and the known are inextricably intertwined), and dialogic/interpretative methodology (Guba & Lincoln, 1998). It is important to understand these paradigms so that they match the researcher's own personal values, beliefs, and personality, as well as personal and mental models (Morrow, Rakhasha, & Castaneda, 2001).

In the present study participants were a culture-sharing group. The approach used investigates the commonalities, or cultural themes, across First Nations youth and how they view wellness in terms of the Medicine Wheel. The data was expected to produce cultural shared patterns by the youth about wellness. Specifically, it was expected that the data would reference shared behaviours (actions taken by the participants regarding wellness), beliefs (how participants think or perceive things regarding wellness), and languages (how participants talk to others about wellness) (Creswell, 2007a). The researcher reported on what was said and represented the participants' experiences through closely edited quotes so theirs was the final word on how culture was interpreted and presented (Creswell, 2007b).

### **Decolonizing Methodology**

An important issue to consider when working with First Nations populations is the effects that Western research methodologies have had. There is an assumption made

by Western researchers that all knowledge of First Nations people can be gathered simply by conducting research. However, simple gathering and claiming information regarding First Nations traditions is colonization. Smith (1999) describes this process as having “been perpetuated through the ways in which knowledge about indigenous people was collected, classified and then represented in various ways back to the West, and then, through the eyes of the West, back to those who have been colonized” (p.1-2).

The present study acknowledges the history of colonization not only as a contributor of the “big picture” of First Nations issues, but as a reminder of maintaining a level of openness while working with youth participants. In order to avoid reinforcing colonization through the means of Western research, the methodological procedure for this research has been framed in a way that allowed the participants to tell their own stories of wellness. The interview questions were flexible in that they were open-ended and encouraged a conversational style with the participants to discuss their own experiences. The Medicine Wheel was a way to support this as a sacred and traditional tool that has existed for thousands of years. Rather than inquiring an explanation of the Medicine Wheel, this research prompted the *participants* to provide their own definitions of wellness through the context of the four dimensions of the Medicine Wheel.

### **Community**

Data was collected in the researcher’s home community. This is a northern, rural community of 5,500 consisting mainly of Anglophone, Francophone, and First Nations citizens. The community is located at the most northern point in the area that is accessible by road; any communities further north become more remote, only accessible by plane or winter roads. Two schools, kindergarten to grade 12, operate in the community: one

Anglophone and one Francophone. There is a reservation located 20 minutes away from the community. However, due to the economic boom in the mining industry within the area, many First Nations families have relocated south to this community from the more remote communities, meaning that the First Nations population is more representative of the geographic area of the community rather than the community itself.

### **Recruitment**

Prior to arriving to the community, two community members were contacted via email. One community member worked directly with youth in the community while the other member oversaw child and youth programs and directed the researcher to contact the coordinators of these programs. Both community members agreed to post the Advertisement (see Appendix A) in their respective organizations. Potential participants contacted the researcher by email and when she was in the community, in-person. Seven participants inquired with the researcher and five agreed to be interviewed. The exclusion criteria for participation were non-First Nations youth and not within the ages of 16-30.

### **Participants**

Participants included five individuals, three males and two females ranging in age from 15 to 20 years old. All participants resided in the urban area of a First Nations community, each identified as Status First Nations, belonging to a Cree band. Participant 1 was a 20-year-old male. Participant 2 was a 17-year-old female. Participant 3 was a 16-year-old male. Participant 4 was an 18-year-old male. Participant 5 was a 16-year-old female. As the researcher collected the data in her home community, each participant knew the researcher as a member of the community as well as the researcher's mother who works in a community healing and wellness program.

## **Data Collection**

A convenience sample was used. Participants received an explanation of the study as well as their right to stop or withdraw at any time, as detailed on the consent form, without consequence (see Appendix B). The researcher conducted face-to-face, semi-structured interviews. Participants were given the choice of location to conduct the interview. Participants chose to complete the interviews in a private room at one of the community organizations and a private room at the local high school. All were conducted at a time and date that was convenient for each.

Each interview took between 35 to 45 minutes to complete. All were audio-recorded and permission to do so was obtained beforehand. Each interview was transcribed to have an accurate and complete record of what was said. The interviews began with demographic questions before turning to open-ended questions (see Appendix C) and finally, debriefing. The interview questions were based on Loiselle and McKenzie's (2006) *Wellness Wheel*, which was a questionnaire to help individuals explore self through a view of current life and reflection on four facets of wellness. The interview questions prompted the participants to reflect on what they felt they needed for their own wellness, how they envisioned wellness, and ways to achieve this vision. Participants were also asked to describe what wellness meant to them.

## **Data Analysis**

After completing the interviews each was transcribed verbatim by the researcher. The researcher read all transcripts and performed a qualitative content analysis procedure (Creswell, 2007b). The data analysis included four additional steps: 1) reading over the transcripts from all interviews to obtain a general sense of content and meaning; 2)

identifying meaning units which were important phrases within each interview; 3) assigning a code to each meaning unit that represented the content of that meaning unit (see Appendix D); and 4) combining codes into themes that represented the breadth of all interviews (see Appendix E).

### **Trustworthiness**

Trustworthiness is promoted in qualitative research in several possible ways that attend to issues of credibility, transferability, dependability, and confirmability (Guba, as cited in Shenton, 2004). These issues are described with ways the researcher addressed in order to promote trustworthiness.

Credibility in qualitative research is similar to internal validity in quantitative research. According to Merriam (1998), credibility deals with the question, “How congruent are the findings with reality?” It accounts for the evaluation of results as a credible representation of the original data provided by participants (Guba, as cited in Shenton, 2004). In the present study, credibility was promoted through prolonged engagement with the participants (30 to 45 minutes each) and thorough description of source data in presenting resulting themes.

Similarly to external validity in quantitative research, transferability is concerned with the extent to which the findings of one can be applied to other situations (Merriam, 1998). Transferability was promoted by provided detailed information regarding the researcher, the researcher’s First Nations background, and the researcher’s interests in this study. Detailed information provided to the participants also included the involvement of the process for engagement, execution of the qualitative research, and description of participant considerations. It is difficult to address the level of

generalizability due to the small sample size of participants used in this research.

Although the findings obtained from the research provide directions for future research in understanding the experiences of First Nations youth, they cannot be considered to generalize directly to *all* First Nations youth.

Dependability is similar to reliability in quantitative research (Guba, as cited in Shenton, 2004). The idea of dependability is that if the work were repeated, in the same context, with the same methods and with the same participants, similar results would be obtained (Shenton, 2004). In the present study, dependability was promoted through maintaining a consistent interviewing process, in which the same question protocol was used for every interview, with similar prompts and consisted of an introduction with the completion of informed consent procedures as well as debriefing.

Confirmability is an appraisal in the comparison of research findings to the collected data (Guba, as cited in Shenton, 2004). Confirmability in qualitative research is similar to objectivity in quantitative research. This was promoted through the use of themes, which established integrity of findings, with codes as descriptors developed from the participant experience. Each step of the analysis was detailed in the Appendices.

### **Summary**

The purpose of this study was to identify, through the Medicine Wheel teachings, 1) what First Nations youth saw as the contributors to well-being, 2) their vision for well-being, and 3) ways to achieve their vision. Use of a qualitative approach was a good fit because of the researcher's immersion in the community and shared culture of participants. Semi-structured interview questions were posed to obtain participants' experiences. The interviews were conducted in a way that allowed participants to tell

their own stories of wellness through a conversational style of interviewing. The interview data were analyzed using a qualitative content analysis procedure. Measures were used to promote trustworthiness in the areas of credibility, transferability, dependability, and confirmability. The results are presented in Chapter 4 and a comparison of the results to the available literature is presented in Chapter 5.



## Chapter 4 – Results

Five themes emerged from the analysis of the transcriptions from open-ended interviews with five First Nations youth. These themes included Balance Strategies and Challenges, Coping Strategies, Emotional Balance, Worldview, and Motivation. In this chapter each theme is presented and represented with several quotes from different participants. A personal reflection of the researcher's experience with First Nations wellness as well as conducting the research is also presented.

### Balance Strategies and Challenges

Balance Strategies and Challenges referred to strategies used by the participants to feel balanced as well as challenges that were identified that got in the way of their balance. There were specific strategies participants used to maintain their balance in order to live “the good life.”

Participants identified several strategies and challenges to maintain good health and well-being through addressing their physical wellness (one of the four dimensions of the Medicine Wheel).

*Eating right, getting exercise. Just trying to be stress-free as much as you can. (Participant 1)*

*Participating in sports and helping other people. That's what keeps me active all the time. (Participant 3)*

*Being healthy, I guess. Like normally when people say you're well, it means like you're not sick... You're not sick, you're physically fit, you can run for a long time. I don't know. I'm not very healthy, so I can't run very far. I can run fast, but not far. Get out of breath lots, cough lots, headaches, I guess being healthy is the exact opposite of all that. (Participant 3)*

Participants not only identified specific strategies, but also discussed particular behaviours that got in their way of maintaining balance. The participants noted that it was difficult to overcome these behaviours.

*I probably need to quit smoking. Probably need to do some better stuff for my lungs... Honestly, I've tried to quit smoking lots but it's not a walk in the park. (Participant 4)*

*I don't want to say... like something health happens. Like a health issues. I'm not being healthy, say, something is damaging my body from eating unhealthy, all the time, eating greasy food. Like getting high cholesterol or something, on those terms. Just try to stay healthy, and I know if you stay fit, a lot of those health issues won't follow. (Participant 1)*

Having a strong support system of peers and honouring those relationships helped participants feel more emotionally balanced.

*Joking around with friends and talking to them. (Participant 3)*

*Chillin' with my buddies... It helps me not think about stuff that make me sad, like, if I had a bad day, just chill with my buds and forget about it. (Participant 4)*

*Biking with friends, 'cause I lost a couple of people from long time ago. Yeah. I just want to know them better, something like that... Yeah, 'cause a couple of the guys like to walk around a lot and bike around and exercise. (Participant 3)*

Participants also described specific health and medical issues that affected the way they maintained their balance.

*Yeah, 'cause I do have quite a bit of problems within, like my bones and whatnot. I don't know how half the bones in my body crack but they do (laughs)...It's challenging because there's so many other good players out there and you need to beat them to get there and there's a lot of other girls of course now with our modern day, like, girls' hockey has become a lot popular than it was back then. And*

*there's a lot of girls looking at the same goal as I am right now, so proving that I am better than them will help me get there. So that's challenging... (Participant 5)*

Not only were the participants aware of how their health and medical issues affected their overall balance, they also understood more about their health and medical issues by understanding their own family histories.

*I've been trying to eat better but it's hard. But I guess, in the future, I want to be able to eat better, I want to be healthier because there's problems that a lot of people have. A lot of my family from my mother's side have diabetes, so that's a risk as well that I could face if I continue eating unhealthily and stuff like that. And so, just trying to stay healthy and stay fit. (Participant 1)*

Although these behaviours and health issues created challenges for the participants, they also motivated them in order to prevent other issues from developing.

*I'm working out constantly, always doing something active just to keep like, you know, in shape. Keeping my endurance and stamina well, 'cause I have lung problems, so doing things like that keeps me going. (Participant 5)*

*I'm not being healthy if say... something is damaging my body from eating unhealthy all the time, eating greasy food. Like getting high cholesterol or something, on those terms. Just try to stay healthy, and I know if you stay fit, a lot of those health issues will not follow. (Participant 1)*

Despite these challenges, participants were able to identify how engaging in these activities provided them with a sensation of what wellness “feels like”.

*Mostly my sports. It just helps me feel physically well.. After I play one of my [hockey] games, I just feel refreshed and everything afterwards. Like, I just feel better. (Participant 5)*

*Shower. If I get up and hung over or I feel sick, I take a shower... Something about a shower just revitalizes you. (Participant 4)*

## Coping Strategies

Coping Strategies referred to the thoughts and actions the participants used to deal with a stressful or threatening situation to maintain balance. Traditionally-speaking, the stressor or threat is assumed to create imbalance in the participants' lives. All of the strategies used by participants were to regain their balance following experience with the stressor or threat.

Relying on a support system was an effective coping strategy for the participants.

*Talking to my mom means a lot to me. She's my best friend. I can tell her anything. It makes me happy because if I can't talk to my friends, then I have someone else to go to...* (Participant 2)

*I spend a lot of time with my girlfriend. We get along very well. We never fight. She's very supportive. She helps me when I am feeling down.* (Participant 1)

*Buddies and sweatlodges, yeah... Just having people to count on, I guess. Maybe, I don't know... I guess strength comes in numbers.* (Participant 4)

*Well, I talk to my counsellor sometimes and I talk to my parents and my friends are always there for me... It makes me feel, like, relieved because I don't have to keep everything in anymore. Everything is like out there and I don't need to hold anything down.* (Participant 5)

Participants identified meaningful ways to release emotions.

*I like to write about my problems. I like to write it and then look at it in a couple of weeks. It helps me more... by taking all my anger out, my sadness.* (Participant 2)

*I pretty much talk to myself sometimes. It helps me... sometimes it helps me take my pain away, but when I feel like it doesn't, I just go right to my mom or call my friends from out of town.* (Participant 2)

Participants also acknowledged ways of coping that did not help them maintain or promote wellness.

*I guess I could be a little less angry. I don't know. Just probably be a little less angry. You know, I'm not angry all the time but like, when I do get angry, it's like, unpretty I guess... (Participant 4)*

*... I started smoking 'cause it was a stress reliever, you know. So then I'm down with stress it's just like cigarettes. When I'm stressed all I'm going to be thinking about is a cigarette. (Participant 4)*

Participants identified steps they could take to change specific behaviours.

*I guess I really got to cut out what I eat when I eat my fast foods and go out to restaurants. I usually go eat at the restaurants like once or twice a week. I have a burger with gravy and it's all... it's probably about the greasiest thing you've ever seen. So, I got to cut down on eating stuff like that. (Participant 1)*

They made sacrifices in some life areas in order to achieve wellness in other life areas.

*I mean, I don't get to see my friends anymore. I have no social life anymore (laughs), this [hockey] is my social life. And of course, Facebook, like every other teenage child and everybody else on the planet. (Participant 5)*

They continued to overcome difficult life challenges to maintain and promote wellness.

*Yeah... like I don't... losing my mom at such a young age, too. That had a lot of big deal of issues. Like it's hard, and I see other people, I don't know. I understand that you're supposed to make things better for yourself but when things add on...I'm not just saying out of my personal experiences. I have seen friends who have through worse than me. I've seen people in the community that have gone through worse than me. It just makes me wonder anyways... (Participant 1)*

*Honestly, I've tried to quit smoking lots but it's not a walk in the park. It's really hard. But you know, I keep trying every now and again. I got friends to help, too you know, but we always end up smoking again, even the breaks count I guess. But I don't know, normally when I try and do quit, I usually cut down first then... I just gotta get rid of stress first and then I won't need the stress reliever. (Participant 4)*

*...I've play with boys since I was a kid and like, this past season I have played with the boys of course, we have to get ready for tournaments and whatnot. But they are a lot stronger than the girls, like I am used to playing with boys and used to their hits and whatnot, but like my legs and everything, my arms are right black after games sometimes from the bruising and all that 'cause I am a defenseman most of the time and I take all the pucks right? 'Cause when you're playing, you don't think, "Oh my god, I'm going to get hurt." You just get right into it and it gets bad sometimes. Like, I've had points where I've had slapshots, someone went for a slapshot and the stick actually hit me on my chin, splitting it open. Yeah, so... it gets a little too intense... (Participant 5)*

They also pushed themselves hard to achieve wellness.

*Even like... back to hockey... I could have a spectacular game but because I push myself too hard, too, that I will be down on myself and I'll go in my room and I'll even sit there and cry 'cause I'm so mad at myself for not doing as good as I should've... 'cause, I just... continuously push myself to the point where I shouldn't and it's also caused me breathing problems and whatnot 'cause I push myself too hard in my sports. (Participant 5)*

Coping also meant that participants needed to practice self-care in a meaningful way.

*Just to keep in touch with my culture, like the powwow dancing, the drumming. I was going to get into the singing, but it's usually the guys I find do that more than the girls, so.... And yeah, the smudging, of course. That actually does help me a lot though, like after having a bad day, I'll go to the Friendship Center with [omitted] or something and we'll smudge. It actually makes me feel better. Like a great relief has been taken off. (Participant 5)*

Staying motivated to feel better about themselves was important despite how difficult it was at times.

*I mean, I go for walks with my girlfriend. Not as often as probably should. But with summer, with the nice weather, we'll probably be out all the time. I could go for runs like I used to. I've been meaning to go get a gym membership but it's expensive around here and I'm a little bit lazy. I need a little bit more motivation to get up and do things.*

(Participant 1)

*School keeps me going.* (Participant 3)

*I don't know... I just happen sometimes. Sometimes I am very unmotivated and sometimes I will clean the whole house for no reason. I am a very on and off person. Like tomorrow I might not want abs (laughs). Who knows? But, I don't know. Watch some motivational speeches. I don't really know how to motivate myself honestly.* (Participant 4)

*It's just basically working out and pushing yourself harder and harder and harder every time. That's all you really got to do.* (Participant 5)

Keeping a positive attitude was also an important way of coping.

*So when see a situation, I see the brighter side and I know how much you could work toward something and you can get better, which eases a lot of tension on yourself, which eases a lot of tension on yourself. When you're thinking like... some people get down and all they see is darkness. They don't see anything else.*

Participants also discussed how their abilities to cope would help them move forward.

*Wellness means like, to me it means getting better in life. In all that... I don't know what to say, but to me it means getting help, talking to people that I can trust again, that I could be more like or something like that.* (Participant 2)

## Emotional Balance

Emotional Balance referred to how participants felt “balanced” in their sense of wellness. This theme contained both positive and negative aspects. Positive emotions referred to pleasant emotions that left the participants feeling secure and more balanced. Negative emotions referred to unpleasant emotions that left the participants feeling insecure and less balanced.

Participants talked about activities they were engaged in that allowed them to experience positive emotions.

*Sports is what keeps me calm, and like, I don't know, at base with myself. (Participant 5)*

Being in the presence of others who experienced positive emotions allowed participants to experience those emotions themselves.

*It makes me feel happy 'cause I'm talking to someone that really cares about me. That really wants to help me and is always there for me and that my spirit is like, smiling because I have friends who are gonna be there for me. (Participant 2)*

Experiencing negative emotions also helped participants gain insight into what they did not believe in.

*I don't know... there's just a lot of things that make you doubt. I don't know... I just don't personally believe. (Participant 1)*

At times, participants felt they were unable to discuss their personal feelings and thoughts.

*There's a lot of arguing in my family... I'm not going to lie, I kind of blame all of my stress on them, like my family... I'm not really one to talk to people about problems. (Participant 4)*



Feeling supported by family members was meaningful and reassuring for the participants as it provided them with safety and comfort.

*A lot of times when I am feeling down, I just look for my support from my mom. My mom passed away five years back. But I mean, she was so supportive when she was here. She knew everything. She believed in me and it makes me feel better knowing that she is always there with me as well. She can help me get through a lot of things when I am not feeling well and I know she's there. That does help a lot. (Participant 1)*

*Like I said before, talking to my mom. Talking to her more and more and more and more, and to let her make me feel happy again and make her get things out of my mind and to support me through anything. (Participant 2)*

The participants experienced wellness with positive emotions such as happiness.

*Myself being happy, I guess... I just, sometimes I feel like having a good life instead of like a depression life. But when I do stuff to keep my mind of things, like what I said to you before, makes me feel like I was never depressed. Like I was always a happy life. (Participant 2)*

*Being happy all the time. (Participant 3)*

Happiness and wellness were connected. Understanding this connection helped them understand themselves better as well as how their overall happiness created balance.

*I guess being happy and living a healthy lifestyle is probably what wellness means to me. (Participant 1)*

*Wellness basically means to keep yourself, you know, happy and whatnot. Just take care of yourself, basically... yeah... Because, well who wants to be an unhappy person and whatnot and ungrateful. I think you should... keep your... how do I word that? Keep in touch with yourself and whatnot, make sure you're still... you know... 'cause like, no one wants to go unhappy if they want to keep in touch with themselves, physically, mentally, spiritually. That's just the way I look at it. (Participant 5)*

Historical events however, created hardship for participants and led to negative emotions.

*Well, due to things that have happened in the past, I was torn down to the point where I was in a depression kind of thing, so ever since then, I've had a counsellor and whatnot and I have actually been getting a lot better, emotionally-wise... (Participant 5)*

Negative emotions forced participants to question themselves and think about what elements were missing from their life.

*... right now, I haven't finished my schooling, which is pretty bad and I have not been motivated by it. It's gotten me down a bunch of times. (Participant 4)*

Despite the difficulties of experiencing negative emotions, it helped youth understand themselves more.

*I think I changed a lot, more than I was before. I am still going through some stuff, but sometimes I feel like I can't talk to anyone sometimes, because I can't trust people and all but I am scared to go through what happened to me... [I wish] that I could forget all of it. I don't want to be like this forever. (Participant 2)*

In times of adversity and hardship, participants discussed the importance of experiencing positive emotions.

*...it's just about being happy. It's not about how much I am getting paid. It's that I am doing something that I want to be doing... Being happy is the number one thing for me out of all things. Life is so short in this world that you could be doing something that you don't like for such a period of time and you're not being happy for your entire life. That's not what I... I prefer to be happy, 'cause things happen in random times. People pass away, accidents happen. You never know, so I mean, I'm just being happy. (Participant 1)*

Despite adversity and hardship, participants continued to work hard to build self-confidence and feel better about themselves.

*I'm hoping to keep moving forward. Like, I've been doing these programs and these little worksheets and whatnot, and just talking to her, it's just helping me a lot and I'm hoping to the point where my confidence and whatnot will be higher than it is now 'cause I do have a low self-esteem due to like, of course, past events... so I'm hoping I could get over that. (Participant 5)*

## **Worldview**

Worldview referred to beliefs and values through which participants saw the world, others around them, and themselves. The participants' worldview was shaped directly by their own experiences, the experiences of important people in their lives, and by gaining knowledge.

The discussion of wellness within the four dimensions of the Medicine Wheel encouraged participants to consider what they envisioned for their lives.

*Another thing I learnt growing up is don't regret your decisions. Embrace the mistakes you've made in the past that you can work to better yourself or to not make those... you learn. So I try not to... any decision I make, yes I make mistakes from time, everyone does. But, I try and stay positive and I have to learn from those mistakes instead of feeling bad about what you did and stuff like that. Just... move on. (Participant 1)*

Understanding themselves through their family and family helped to shape their worldviews.

*Well I just turned 18 so I'm going to move the hell out. It's just... I love my family but you know, when you're together with someone for too long or like people too long, it just gets hectic and well all need our space. (Participant 4)*

*Move out. I'm not going to lie, I kind of blame all of my stress on them, like my family but we'll only know until I move out and then if I am still angry, I'll find a new way to get over it, You know what I'm saying. (Participant 4)*

Participants discussed how reading and accessing information on the Internet helped them learn more about the world and become more knowledgeable.

*Well, I want to be able to just... know everything like with my sports, like what's going on... Like I want to be able to look on the ice and be like, "Kay, she's going there, she's going there, and it's going to go in." Like right now, I've been working on that a lot lately and sometimes I don't always get them, but I'm doing pretty good at it. So, like, I'll sit there watching NHL games for hours and hours and even reruns, trying to see what they're doing. Getting ideas for myself so I can make my own plays and to figure out I can stop another play happening against my team in a defensive play. (Participant 5)*

*I read up on things if that counts for anything. I read up on a lot of things, news articles over the internet and all. Try to keep updated on the world, how it's moving, what it's progressing towards... It just helps me get knowledge and being knowledgeable... it helps understand things and to see the bigger picture of things. (Participant 1)*

*Helping out, I guess. Yeah... like listening to people about themselves and reading... Yeah, on the internet. I just read stuff on the Internet, the news, too. Helps me, "What's up?" Like knowing what's going on. Like, religions and different stuff. (Participant 3)*

Participants' beliefs and values were shaped by past experiences.

*I've been through some times living in my life so I know how bad things could get. (Participant 1)*

*You see things that happen... I just have a hard time believing there's something bigger there. A lot of people believe in God. I'm not trying to be controversial about it. I personally don't believe. I've been through things, I've seen things happen to other people that I don't believe that if there was truly someone there that... like things like this shouldn't happen. There's things in this world that just shouldn't happen and if there is something that, you know, as high as god that controls what goes on... I don't believe. (Participant 1)*

The internal emotional processing of past experiences helped participants understand their own worldviews and how they were able to move forward.

*I guess a lot of things is accepting. Accepting things that happened. I had a hard time accepting the issues I've had, losing my mother and stuff like that. I've lost uncles and seen you know, suicide and stuff like that. I haven't seen one vision, but I have seen a lot of my family members fall toward stuff like that. I guess it's just accepting; it's accepting what happens. I really don't know how to, I can envision the future and spirit but I guess accepting is probably the only word I can use. If I can move past things and maybe there is a bigger picture that I can't see right now that I might, you know, embrace in the future. Some kind of, sort of, spiritual thing. (Participant 1)*

Participants also shaped their worldviews through new opportunities and the worldviews of others.

*Yeah, the higher level you get at, the more scouts look at you. So, and like, I play in lots of different tournaments and whatnot so that, like I play for pickup teams everywhere 'cause I've played for different places so I get lots of phone calls asking to play for them on the weekends and what not, so which helps me get noticed even more. It gets me really excited, like... this year, first week of July, I am going to train with Team Canada and only 20 girls all over Ontario got asked. (Participant 5)*

*...but I could learn though from my mistakes is that at least in the future, If I get to the point, like in college, I can't be slacking like I did, like I do. I put things off 'til the last minute, which greatly affects the quality of things, so learning from my mistakes, trying to be successful in like. I guess getting a job, going out on my own and being successful... (Participant 1)*

*Like listening to people about themselves. (Participant 3)*

By understanding their own worldviews, participants were able to better understand wellness.

*Wellness would mean like how you come from your health, your mental health, how you see what your life is going to be like. Are you happy? Your future... (Participant 1)*

Knowing their worldview also helped participants understand their environment.

*Yeah, it just... for me, and it keeps me thinking kind of thing and with my sports, I need to be aware of those kind of things and as my age, being a 16 year old girl living in the cities I'm going to be, to be aware of my surroundings is something that's gonna be good for me to do. (Participant 5)*

*It helps me know what I am going through and that I have a positive way of getting out those problems. (Participant 2)*

*... travelling somewhere, trips... Going back to the places I was there before, like when I was younger. (Participant 3)*

Experience helped them grow in their worldview and understanding of what wellness meant to them.

*It's just... my mindset is that I like being happy and being positive. That's how I go around things. I take things day by day. I look to the future, you know, for bigger-picture type of things. But I don't like to make, you know, huge amount of steps and plans because a lot of times with those things, never everything really seems to go according to plan. So if you take things by day, take things step by step, instead of thinking about what's going to happen, you know, so in so time and time after that. You just take what happens now and move on to the next. So, you look... live now is what it is. I don't want to be planning too far into the future and you know, what if something happens and my whole plan is gone. So, you just take things day by day and stay happy and positive. (Participant 1)*

## **Motivation**

Motivation referred to how participants initiated, guided, and maintained goal-oriented behaviours. These behaviours directly influenced how they maintained their

balance by setting goals that were consistent with living “the good life”. Promoting this balance contributed to wellness.

Participants’ education and career goals motivated them to achieve balance.

*I have two years to graduate. I can’t wait... I actually can’t wait to graduate ‘cause I’m excited to get out of this school and go to college. Those are one of my goals is to finish high school and get my diploma and go to school. Coming to school, what I am doing right now, every day, is what I am doing to attain my goal. (Participant 2)*

*Get a job, get money, and move on. Like moving down south... Yeah, like my vision, I want to be a police officer. I want to go to [omitted] police since that’s my hometown. (Participant 3)*

Participants discussed their motivation in daily extracurricular activities.

*Well, right now I’m moving down south to [omitted] because I made the hockey team there and I made Team [omitted] as well for Triple ‘A’ Girls’ team but like, there’s not enough teams that qualified for tournaments and whatnot, so I can’t play with them until next year, hoping more teams will qualify. If not, I have to move over to the boys’, which I kind of get nervous about sometimes. But I’m moving down south just to get myself ready for that, ‘cause when I am 18 I am going to a camp to see whether I am ready or not yet for Olympics , so we’ll see how that works out. (Participant 5)*

*...when I get a car, it will so not be a problem to go to school. I don’t go to school ‘cause I live right here and I gotta walk to the high school every day. I really hate winter and I really hate being too hot and I just hate walking. So, when I get a car it won’t be a problem, but I just got to force myself to go to school. (Participant 4)*

*Being active, I guess. Like going to daily activities with people like basketball and baseball and parks. That’s what keeps me going all the time. (Participant 3)*

*Being captain and all that and most of my games. Can’t really say all of them (laughs). I always have to make game plans and everything and really figure out how things work*

*and if someone else, like the opposing team were able to do something, how I can fix that and intercept that and stop them coming back against my place. (Participant 5)*

Activities also included community involvement. Getting involved in the community not only helped participants to stay motivated, but through establishing and maintaining strong connections with the community and its members, they promoted their own wellness. Involvement in sports, as an example, encouraged participants to pursue additional opportunities.

*It just, you know, keeps me thinking and all that. It just helps... it just makes me feel better. Everything is by athletics. I just base everything off on my athletics, like in my life. I'm pretty much moving down south for it and all that... (Participant 5)*

Participants acknowledged how their involvement in the community affected not only how they envisioned their wellness, but also the wellness of the community. An example of this is involvement in community activities, such as hockey.

*When you've played hockey for as long as I have, you don't even notice it half the time, but it just, I don't know, it just makes you feel really good about yourself. You went out there, you showed everybody what you can do, you've impressed people, and you've motivated and inspired others, it just makes you feel good about yourself. (Participant 5)*

Participants were motivated to maintain connections to their First Nations traditions.

*Well, when I'm dancing... I don't know... it feels like I'm keeping connected with my culture and whatnot. So, and like, there's like, in our modern day, there's lots of Aboriginals don't do that anymore. So I'm happy that I am still interested in smudging and my powwow dancing and whatnot. (Participant 5)*



*Yeah. There's times like there's powwows and I can't go. And I want to go so bad because it's me. I love my culture, so... 'cause I've got friends, too that I know who are drummers and dancers. You want to see them again and you feel so much better when you see them 'cause of their hugs and they're like a second family and all that. You know what I mean? (Participant 2)*

Establishing a cultural connection with their community motivated them to become more aware of themselves.

*Well I still like smudging and going to powwows and all that, so, that actually helps me feel spiritually well 'cause I feel like I am in touch with myself and with, like my background, like my native background and all that. (Participant 5)*

However, challenges that got in the way of maintaining cultural connections created difficulties..

*Man, a good sweatlodge or a powwow. I don't know, it makes me feel cleansed. Something about a powwow gets my heart going, like the [omitted] boom boom. I don't know. You just feel better after, you know, and the sweatlodge, I don't know. It's hard to explain but you just feel pure coming out of a sweatlodge, you know what I mean? Plus I stay away from the booze and the weed for the 3 days before, too. So, you know it feels good to be sober and all that, too. Yeah pure I guess. (Participant 4)*

Staying involved and maintaining a connection with the community was a lifelong pursuit that participants were motivated to continue.

*Well I want to keep doing it, like even when I'm older like even get my kids to stay in that kind of thing 'cause like I think it's just good for me to stay in touch with my culture and whatnot 'cause it's just something I don't want to lose. It means a lot to my family, too. That's how I was raised. It's just... I don't know... it's a big part of me. (Participant 5)*

Understanding themselves and how they envisioned wellness motivated the youth to work toward ultimate life goals.

*Bettering yourself... I guess, a lot of that, like I said, learning from my mistakes, trying to use that to be successful in whatever I am doing. (Participant 1)*

*No one likes angry people. Yeah. I don't know. My mom keeps telling me I gotta get an attitude adjustment. (Participant 4)*

Participants also discussed how a lack of motivation created difficulties that got in the way of achieving their goals.

*I'm not doing very good in school right now, so I should get on track. I only need 8 credits left and that's like a full year, so I need to make sure I don't fail anything. So that means I have to start going to school more and actually doing the work. See, the problem is I am smart enough doing the work. I show up once a month and do all my work in a period and I pass with about a 50, every year. Just, I need to get it in my mind to go to school and do the work all the time, and apply myself and get good grades instead of just average. (Participant 4)*

*...but I mean, I look at it... I know I can get it done. I'm slowly doing it through correspondence. I have a tough time working with writing and stuff like that. I have no motivation at all to do stuff like that. So it's taking me longer... (Participant 1)*

Despite hard times in the past and present participants were motivated to push through and look ahead toward the future.

*I just try to look forward toward the future, try and see the brighter side of things. Even though, things get bad but things can always get worse. Just got to make things better by working toward it. So I try not to be negative about anything. (Participant 1)*

*...get a job so I can be on my own. I can finish my school and after that, just, you know, working and getting a career that I want to pursue. Like there's a lot of things I want to*

*pursue but unfortunately, my marks can't... like I wanted to be an aviation mechanic. That would've been fun but my marks are nowhere near what's needed. So, I can look toward other things. I can see if I can be a helicopter pilot of some sort or... just things along the lines of that. Just trying to focus on what I want to do, not what's available, what's there. It's what I want to do, just work towards that. Even if it takes a longer road than most. (Participant 1)*

## **Summary**

After transcribing each interview, the researcher read each transcript and a content analysis procedure was employed to construct the themes. Five themes were identified and included Balance Strategies and Challenges, Coping Strategies, Emotional Balance, Worldview, and Motivation. Balance Strategies and Challenges referred to strategies used by the participants to feel balanced as well as challenges that were identified that got in the way of their balance. Coping Strategies referred to thoughts and actions used to deal with stressful or threatening situations to regain balance. Emotional Balance referred how participants felt “balanced” in their sense of wellness and included both positive and negative aspects. Worldview referred to how they saw the world, others around them, and themselves. Motivation referred to how the participants initiated, guided, and maintained goal-oriented behaviours.

## **Researcher Reflections**

An account of the researcher's experiences with this study is offered to promote trustworthiness. The section is a personal account of researcher's experiences coming into the research, what was noticed during the study, how it affected what was found and the way it was reported it. Specifically, the researcher's personal interest in this research is presented and followed by the researcher's experiences of the recruitment and interview processes.

**Personal Interest in this Research.** As a First Nations young woman (and traditionally-speaking, a youth), I have always been interested in the wellness of First Nations people. As the daughter of a healing and wellness worker, I have been raised to be sensitive and empathetic towards the needs of other people. Her dedication to clients and efforts to increase the community's awareness of the importance of wellness is initially what had inspired me to enter the helping profession and ultimately, conduct this research.

Despite our history with Canadians regarding colonization and the attempts at assimilation through government dependency and the residential school system, we (First Nations people) are still here and our communities are rebuilding and growing back into the vastly distinctive population that once existed. This is reflective in the current statistics regarding the First Nations population (Statistics Canada, 2008). The statistics regarding First Nations youth are astonishing; it continues to amaze me how many disadvantages First Nations youth continue to face in order to live the same lives that the rest of youth in Canada do. Yet, First Nations youth are going to represent a large portion of the Canadian population in the next 20 years and will have a chance to make a difference in Canadian society. One of the teachings that I received as a child was that youth represent the next generation, or "the voices of tomorrow." I recognize that there is a high need for healing amongst First Nations people; conducting research with First Nations youth with respect to wellness provides a further, in-depth understanding of how we, as helping professionals, can serve this need.

As a person who belongs to "both worlds" (that is, having been born with both First Nations and European descent), I did not have many opportunities and connections

to learn about my cultural traditions. Thus, learning and understanding how cultural connectedness is a crucial component to healing and wellness amongst First Nations people continues to fascinate me on both professional and personal levels. This is what initially led me to researching this topic.

**Participant Recruitment Process.** Much of First Nations research is community-based and conducted in collaboration with community members. This research study was no exception. Based on my background and pre-established community connections, my research gave me an opportunity to utilize community-based research methodologies in my home community. I connected with previous colleagues in the community in order to recruit participants. First, I contacted the Executive Director of the local native friendship centre a month prior to the anticipated date for data collection. He gave me permission to go through the friendship and not only talk to the Coordinators of the affiliated youth programs, but also gave permission to use a room to conduct some of the interviews. The friendship centre was a great avenue to find participants as I could connect with First Nations youth who reside either on the reserve or urban area of the community. Second, I also spoke with the Recreation Worker of the local community centre as she does a lot of programming with the local youth. Both contacts were very interested in the project and enthusiastic about finding participants for this study. They posted my participant recruitment advertisement on their community bulletin boards as well as through advertised the study via word of mouth.

Shortly after, I was contacted either by telephone or directly in person, identifying which youth I should be in touch with. I scheduled to meet with three of the participants

in a private, quiet room at the local friendship. I also scheduled to meet with one participant at his home and another participant at the local coffee shop.

**Interview Process.** Each participant was provided with an explanation of the nature of the study and I had assured each that all information they discussed with me would remain anonymous and confidential. I also assured them that no identifying information would be written in this document. Each participant signed the informed consent form and was provided an information sheet regarding the study. I also explained to them that if they wish to know more about the results of the study, they can email either myself or my thesis supervisor.

Following the interview process, I debriefed each participant and directed her or him to various community resources, if needed. I also gave them an opportunity to ask questions or make comments in order to gain feedback on their participation in the study. All five youth claimed that wellness was a topic that “never really crossed their minds” but the interview questions encouraged them to begin thinking about wellness and what their balance looks like. The interview process was a powerful experience for me to be a part of as the use of open-ended questions allowed each participant to explore and understand what wellness means to them, what it looks like, and how they are going to achieve that vision within each dimension of the Medicine Wheel. I encouraged each participant to contact me again if they had any further questions or concerns related to the study.

**Western and Indigenous Ways.** This study was based on the researcher’s personal and professional interests to work within “both worlds;” that is, the Western world of thinking and First Nations ways of being and knowing. However, these two

worlds pose conflict when they meet because of the vast differences in how both approach and gain knowledge. Stewart (2009) argues that this conflict stems from issues with bias (subjectivity within data interpretation and analysis), generalizability (generalizing findings from a population sample that is distinctive from its counterparts), and indigenous ways of knowing (competing paradigms of knowledge).

With respect to this research, bias was minimized due to the cultural resonance that already exists within the researcher. As the researcher resided in the same community that the participants resided in, much of their experiences were interpreted through the researcher's lens of her own experience as a youth. The researcher remains connected to this community and participants' descriptions were translatable from her own experiences.

Generalizability was also a challenge posed into this research. Generalizing results from a study of a population sample to a broader population is often viewed as the goal of Western scientific research (Creswell, 2007a). However, this becomes challenging with First Nations communities as there are cultural differences within and between groups, individuals, and communities (McCormick, 1997). Although these cultural differences make it difficult to generalize findings of all First Nations youth based on the experiences of five Cree youth, the implications of this study enhances academic knowledge about cultural differences and guides researchers to be culturally sensitive to the needs of First Nations people. Thus, the goal of this research is to generate results that are valid and rigorous within the community where they are gathered (Stewart, 2008).

Within academia, there will always be knowledge paradigms that compete with each other. This also goes for Indigenous ways of knowing and being. With respect to this research, the challenge is in the study's balance – to incorporate elements of both Indigenous and Western approaches – so they are equally reflected in the methodology. For example, this study uses a qualitative approach, but is largely guided by a First Nations symbol and incorporates community protocol and community consultation into the methodology. Even though the data was analyzed a Western analysis procedure, the themes were derived through the lens of a First Nations researcher.

### **Summary**

From the content analysis of transcribed interviews with participants five themes emerged. These themes included: Balance Strategies and Challenges, Coping Strategies, Emotional Balance, Worldview, and Motivation. Together, these themes described the common experiences of wellness amongst the participants. As much of the statistics reflect “what’s wrong” with First Nations youth, it was a powerful experience for me as the researcher to understand from the youth themselves, in their worlds, what wellness meant to them. This experience further reinforced the importance for me of First Nations youth voicing their thoughts, ideas, opinions, and feelings.

A comparison between findings from the present study and what has been reported in the literature is important. First, there is an assumption that First Nations youth are a homogenous population, which is not the case. Second, much of the research regarding the First Nations population identifies the “problems” that exist in communities rather than the wellness that exists. Third, the bulk of existing literature is based on quantitative research, with little attention to qualitative findings. Fourth, little is known



about the experiences of Northern First Nations youth relative to First Nations youth in the urban south. Chapter 5 includes a comparison of similarities and differences between this study and the existing literature.

## **Chapter 5 – Discussion**

Five themes emerged from the analysis of transcribed interviews with First Nations youth: Balance Strategies and Challenges, Coping Strategies, Emotional Balance, Worldview, and Motivation. Similarities between findings of the present study and existing literature include participants' engagement with wellness, their relationship with the Medicine Wheel, collectivism, multi-systemic perspective on wellness, physical health problems, control, and identity. There were also differences from the literature apparent within the themes of Emotional Balance and Worldview. This chapter includes implications for counsellors who provide support and interventions to First Nations youth and their communities as well as for future research.

### **Summary of Themes**

Balance Strategies and Challenges referred to strategies used by the participants to feel balanced as well as challenges that were identified that got in the way of their balance. These were specific strategies used by participants to maintain balance in order to live “the good life.” The participants identified several ways to maintain good health and well-being through physical wellness (one of the four dimensions of the Medicine Wheel). Strategies that got in the way of maintaining their balance were also identified. Having a strong support system of peers and honouring these relationships helped the participants feel more balanced. Specific health and medical issues as well as related family history were identified as contributors and detractors. These issues motivated the participants to work hard to achieve wellness.

Coping Strategies referred to the thoughts and actions participants used to deal with stressful or threatening situations to regain balance. One of the more significant

coping strategies was reliance on a support system. Another included releasing bottled emotions in a meaningful way. Participants also identified specific strategies that did not help them meaningfully maintain or promote wellness and ways they would change them. They also spoke about making sacrifices to overcome difficult life challenges. At times, they pushed themselves too hard or overused their coping resources and need to take better care of themselves. The need to practice self-care also helped participants promote wellness. Staying motivated and keeping a positive attitude was also used by the participants to help them move forward and look toward the future.

Emotional Balance referred to how participants felt “balanced” in their sense of wellness. This theme contained both positive and negative aspects. Positive emotions referred to pleasant emotions that left them feeling secure and balanced. Negative Emotions referred to unpleasant emotions that left them feeling insecure and less balanced. Participants engaged in activities that allowed them to experience positive emotions, such as being in the presence of others who experienced positive emotions. Positive emotions also meant feeling supported by family members. Participants specifically mentioned happiness. By understanding their own sense of happiness, they better understood themselves and how their happiness contributed to balance and wellness. Negative emotions provided feedback on how wellness was not maintained. Although these negative emotions helped them gain insight into what they believed, it also discouraged them from discussing personal thoughts. Positive emotions are especially important when living in times of adversity and hardship. Many of their past experiences have created hardship and forced them to experience negative emotions that shaped the way they viewed wellness. Despite these difficulties, negative emotions also

helped participants understand more about themselves and to question what elements were missing from their life. Participants continued to work hard to build their self-confidence and feel better about themselves.

Worldview referred to beliefs and values of participants in relation to how they saw the world, others around them, and themselves. Their worldview was shaped directly by their own experiences, the experiences of important people in their lives, and gaining knowledge. A discussion of wellness encouraged participants to consider their values and what they envision for their lives. The participants attempted to understand themselves through their family and past experiences. The processing of these experiences helped them understand how they would move forward. Participants also discussed how reading and accessing information helped them learn more about the world and become knowledgeable. The participants also shaped their worldview through new opportunities. An understanding of their own worldview helped them better understand what wellness meant to them. Experience helped them expand and grow in their worldview and their overall understanding of what wellness means to them.

Motivation referred to how participants initiated, guided, and maintained goal-oriented behaviours. These behaviours directly influenced balance and contributed to their wellness. Education and career goals motivated them to achieve balance. Their daily and extracurricular activities helped them work toward their goals, including building connections and getting involved in their community. Community involvement helped the participants envision their wellness, but also the wellness of the community. The participants were motivated to maintain connections to their community, especially their First Nations traditions. Establishing a cultural connection with their community also

motivated the participants to become more connected with themselves. Challenges that got in the way of maintaining cultural connections made it more difficult and less motivating for participants. Staying involved and maintaining a connection with the community was a lifelong pursuit that participants were motivated to continue. Understanding themselves motivated them to work toward long-range goals. The participants discussed how a lack of motivation created difficulties, but that despite hard times, they were motivated to push through and continue to look ahead toward the future and a happy life.

### **Similarities to the Literature**

There were several consistencies between the literature and experiences of participants in the present study. These similarities included participants' engagement with wellness, relationship with the Medicine Wheel, collectivism, multi-systemic perspective on wellness, physical health problems, control, and identity. Overall, the data from the present study was largely consistent with the literature presented in Chapter 2. This lends credibility to the concepts and constructs described by other researchers working with First Nations youth on the topic of wellness and supports applicability of those findings to First Nations youth interviewed in a rural northern community.

**Engaged in Wellness.** The previous literature found that First Nations youth were engaged in wellness through empowering activities (Blanchet-Cohen, McMillan, & Greenwood, 2011). Interviews and focus groups conducted by Blanchet-Cohen, McMillan, and Greenwood (2011) highlighted the value of affirming First Nations youth and their role as determiners of their own health. As the interviews were structured around the theme of wellness, it was no surprise that all five themes reflected ways in

which the participants engaged with wellness. The participants discussed a wide range of activities, such as good hygiene, having a strong support system, feeling happy, reflecting on hardship, education, setting goals, and getting involved in the community. These activities reflected a broader approach to wellness by linking together culture, identity, and health (Blanchet-Cohen, McMillan, & Greenwood, 2011). However, engaging in more health-promoting behaviours, such as positive emotions and extracurricular activities, also influence how much participants engage with wellness. These behaviours enhanced wellness for First Nations youth. As First Nations youth appear to already engage in behaviours that promote health and wellness, they will link these behaviours with other health-promoting behaviours, increasing the number of strategies in which First Nations youth can maintain their wellness and balance (Elias, Leader, Sanderson, & O'Neil, 2000).

**Relationship with the Medicine Wheel.** Existing research reported that the Medicine Wheel was a relevant symbol First Nations youth used (Baskin, 2007; Moran & Bussey, 2006) and that balance within the Wheel promoted wellness (Bergstrom, Clearly & Peacock, 2003; Elias, Leader, Sanderson & O'Neil, 2000). Participants discussed a number of strategies to approach wellness through the four dimensions of the Medicine Wheel, consistent with previous research (Isaak & Marchessault, 2008). This was also consistent with literature focused on wellness from four dimensions (Lowe & Struthers, 2001; RCAP, 1996; Struthers, Kass, Hill, Hodge, DeCora, & Geishirt-Cantrell, 2003).

**Collectivism.** Collectivism refers to “shared attitudes, beliefs, norms, role and self-definitions, and values of members of each culture organized around a theme” (Triandis, 1996, p.407). Collectivism for First Nations youth included cooperation,

emotional attachment to others, concern with others' opinions, and attention to family and relatives (Mussell, Cardiff, & White, 2004). There was extensive literature about how First Nations youth relate to their communities to understand wellness (Kirmayer, Brass & Tait, 2000; Mussell, Cardiff & White, 2004; Parrack & Preyde, 2009), suggesting that a collectivist approach is relevant. Participants also identified this. They associated wellness with collectivism through their community involvement, such as participating in extracurricular activities, getting involved in community events, being a leader, and inspiring others. Their community involvement was consistent with literature on experiences of collectivism and interconnectedness within First Nations communities (Mussell, Cardiff, & White, 2004).

Participants' coping also took on a collectivist approach. They noted that relying on a support system was an effective strategy to achieve wellness. This was similar to the research reporting that wellness increased with a collectivist orientation and support system (Jones, 2004; Parrack & Preyde, 2009).

**Multi-Systemic Perspective.** Previous research noted that First Nations youth viewed wellness as a combination of different systems working together, including family, community, and culture (Jones, 2004; Kirmayer, Brass & Tait, 2000). These four systems are discussed in further detail.

*Family.* Family was identified as a common support by participants as well as a way of maintaining their wellness, similarly to what has been reported in other research (Kirmayer, Brass, & Tait, 2000; Kral, 2003; Jones, 2004; LaFromboise, Hoyt, Oliver, & Whitbeck, 2006). When talking about emotions was open the likelihood of balance and wellness increased (Kral, 2003). Relying on and feeling supported by family members

was meaningful to participants and helped them feel better about themselves. Even for those who did not feel a strong connection with family members, the importance of staying connected with family members was strong (Mussell, Cardiff, & White, 2004; Stockburger, Parsa-Pajouh, de Leeuw, & Greenwood, 2005; Williams & Mumtaz, 2007).

*Culture.* Connection with the culture is also associated with wellness by First Nations youth (Chandler & Lalonde, 1998; Jones, 2004; Kirmayer, Brass & Tait, 2000; Kral, 2003; LaFromboise, Hoyt, Oliver & Whitbeck, 2006). Participants were involved and maintained connections with their community's culture. Previous research noted that a cultural connection was not only important at the individual level but at the community level as well (Chandler & Lalonde, 1998). For the participants, involvement with the community was significantly tied to a cultural connection.

*Community.* A connection with the community enhances sense of belonging and is integral to First Nations youths' sense of wellness (Jones, 2004; Kirmayer, Brass & Tait, 2000; LaFromboise, Hoyt, Oliver & Whitbeck, 2006; Stockburger, Parsa-Pajouh, de Leeuw & Greenwood, 2005). The participants' experiences with community were consistent with the literature. The ways that participants were involved with the community, either through participating in extracurricular activities or cultural events also impacted the community. This is consistent with research on community-based initiatives as a means of healing and facilitating wellness (Mussell, Cardiff, & White, 2004). Although the participants did not discuss educational curricula, as reflected in the literature (Aho et al., 2010; Parrack & Preyde, 2009; Strand & Peacock, 2003; RCAP, 1996), they discussed their experiences with wellness in terms of future through setting goals for themselves in their education, necessary for the careers they wanted.



These three systems, including family, community, and culture, were part of participants' experiences with wellness, consistent with the literature regarding multi-systemic approach toward wellness (Strand & Peacock, 2003) which found these systems to act as protective factors for First Nations youth.

**Physical Health Problems.** There were consistencies between the youth in the present study and the existing research regarding to physical health problems as a common obstacle. The prevalence of chronic health problems is higher for First Nations youth than it is for all Canadian youth (Reading & Wien, 2009). The participants identified some health problems, such as including respiratory problems (First Nations Information Governance Committee, 2003). The participants also discussed specific behaviours that created additional health problems that got in the way of their wellness, such as poor diet and minimal exercise. These two factors have been studied and are known to create and exacerbate physical health problems for First Nations youth (Campbell, 2002; Hanley, Harris, Gittelsohn, Wolever, Saksvig, & Zinman, 2000; Judd, Griffith, & Faustman, 2004). The participants acknowledged how their physical health problems challenged the way they maintained balance and wellness.

**Control.** Results from the present study are consistent with the literature about perceived control over personal well-being (Tiessen, 2007; Tiessen, Taylor & Kirmayer, 2009). Participants' experiences are reflected in their perceived internal and external control over their wellness. When youth perceive themselves to have high individual internal (e.g., self) and external control (e.g., the Creator, others), they demonstrate more positive self-esteem and positive emotion (Tiessen, 2007; Tiessen, Taylor & Kirmayer, 2009). Participants discussed ways they relied on their individual, or internal, control in

order to maintain wellness, including self-motivation, using effective coping strategies, having a positive attitude, education, setting goals, extracurricular activities, and getting involved in the community. External control over their own wellness was largely experienced by relying on a strong support system. This was also consistent with a collectivist approach to wellness, where findings report high perceived group control is associated with greater wellness (Chandler & Lalonde, 1998; Tiessen, 2007; Tiessen, Taylor & Kirmayer, 2009).

**Identity.** Development of identity is integral to wellness for First Nations youth (Lavallee, 2008) and especially a sense of cultural identity (Kirmayer, Brass, & Tait, 2000; Lavallee, 2008; RCAP, 1996; Tiessen, 2007; Williams & Mumtaz, 2007). Much of the literature regarding identity and wellness for First Nations youth is about positive connections with culture, as well as family and community (Strand & Peacock, 2003). Participants stay involved in the community through their extracurricular activities, interacting with community members, being leaders, and participating in cultural events. The participants also found that their community involvement and connections with the community helped them develop their cultural identity and become more self aware. This is similar to results found by Strand and Peacock (2003) as well as Moran (1999) where First Nations youth described development of a good self-concept through being well-grounded and connected to their culture and community.

### **Differences from the Literature**

There were also some differences between the experiences of youth interviewed for the present study and the literature. Regarding Emotional Balance, differences were a result of the lack of literature investigating the emotional dimension including both

positive and negative effects in relationship to balance. In addition, Worldview was different from existing literature in that the youth interviewed had a “bigger picture” in mind for First Nations youth.

**Emotional Balance.** This theme included both positive and negative experiences with emotion. Positive emotions referred to pleasant emotions that left participants feeling secure and more balanced. Negative emotions referred to unpleasant emotions that left the participants feeling insecure and less balanced. The existing literature identified “emotional problems,” such as lack of self-confidence and self-worth that may exist amongst First Nations youth (Walmdrum et al., 2008). However, this only perpetuates the problem of “pathologizing” First Nations youth in research.

Understanding emotional balance through the context of wellness helps First Nations youth understand what purpose their emotions serve. Also, their positive and negative experiences (both past and present) encourage First Nations youth to reflect on how their emotional dimension reflects their level of balance. Results of this study suggest that First Nations youth need to be in tune with their emotional dimension of balance to gain insight about themselves and what their own emotional indicators of wellness are.

**Worldview.** Worldview referred to beliefs and values of participants in relation to how they see the world, others around them, and themselves. Their worldview was shaped by their own experiences, the experiences of important people in their lives, and knowledge through education. This topic has not been addressed in the literature. The bulk of existing literature focuses on specific issues that affect First Nations youth, such as physical health problems, substance use, and suicide, whereas, youth in the study had a “bigger picture” of First Nations youth about future with success. The interviews

prompted participating First Nations youth to consider their own values and belief systems when envisioning balance and well-being. Their past and present experiences, including family conflicts and personal life issues, allowed them to question and reshape their worldview, while remaining optimistic and future-oriented. These results suggest that worldview of First Nations youth is influenced not only by past experiences and environmental influences, but the possibilities that First Nations youth envision for wellness, for themselves and their communities.

### **Conclusion**

Participants in the present study identified challenges and facilitators of health and wellness. They also identified a wide range of coping strategies. They experienced both positive and negative emotions that either promoted or got in the way of wellness. Despite challenges, they continue to develop and redevelop their worldview in order to feel their balance. Participants set goals for themselves to stay motivated not only in their education and career activities, but in their communities as a way of helping them move forward in their lives. They were striving to establish and maintain strong cultural connections with their community to promote both individual and collective wellness.

Many similarities were found between the study's findings and the existing literature. This speaks to the credibility of the concepts and relationships described by other researchers working with First Nations youth and wellness. The similarities also lend support to the applicability of existing research with First Nations youth who live in the North. This is significant as Northern First Nations youth are underrepresented in the existing research.

However, two key differences between participants in the present study and existing literature were found. First, understanding the emotions of First Nations youth determines the kind of relationship they have with wellness, but also steers far away from the problem of “pathologizing” First Nations youth in research. Second, the worldview of First Nations youth is dictated by more than past experiences and environmental influences, suggesting that First Nations youth are focussed on the “bigger picture” of their lives and their relationship with wellness in the present as well as optimistic for the future. These differences suggest that future research may consider concepts of emotion and worldview to more fully explore the experiences of First Nations youth.

### **Implications**

The results of this study have implications for helping professionals who provide support and intervention to First Nations youth and their communities as well as for future research.

**Counsellors.** The results of this study demonstrate the ways in which First Nations youth conceptualize wellness from a holistic, cultural context based on the teachings of the Medicine Wheel. As the results speak about culture and traditions as contributions to First Nations youth wellness, the question of cultural differences comes into mind. The collectivist nature of First Nations communities would allow ease for First Nations (as well as Inuit and Métis) counsellors to work in other First Nations communities. However, challenges for non-First Nations counsellors may rise when working for First Nations youth because of the poor historical relationship between First Nations and non-First Nations people that has existed since contact.

In order for non-First Nations counsellors to work effectively with First Nations clients, education and cultural awareness is key. Educating oneself on the historical and cultural impact of colonization (as well as assimilation strategies, such as the Indian Act and residential school system) is the first step. It may also be beneficial for counsellors to become educated of the teachings of the Medicine Wheel as a way of helping First Nations conceptualize wellness and balance. It appears that based on the results of this study as well as the literature review that the Medicine Wheel is a valuable tool for counsellors to use for guiding the therapeutic process with First Nations clients. Counsellors can use the Medicine Wheel to not only identify where imbalances lie in the client's life, but also for the development of the client's goals and treatment plan.

Not only can the Medicine Wheel be used for client wellness, but anyone can use the Medicine Wheel as a guideline for wellness, including counsellors. As mentioned earlier, the Medicine Wheel can be used to identify imbalances and aid in the development of client goals and treatment plan. It can also be used as part of formulating one's self-care plan. Identifying what activities or strategies are required for each individual dimension of wellness can help counsellors understand when and how they are "fit to practice" or "balanced." However, the question remains of when balance takes place. When do we begin to feel balanced? How do we know when our lives are balanced? What evidence suggests this? How do we know when we feel imbalanced? Perhaps future exploration is needed for one to determine a more concrete model of what balance looks and feels like.

Regarding program development, counsellors can use these findings to develop youth programming that integrates a cultural and holistic structure into its curricula using

the themes and research design of this study as guidelines for developing topics of focus for its participants. The use of this programming in the community can also be structured in a way that encourages youth to be capable of finding balance and empowering them to maintain wellness through this balance. However, counsellors should keep in mind that this implication is based on findings with Cree participants. While the elements of culture may be generalizable, the themes may not reflect the wellness experiences of Ojibway, Mohawk, or Blackfoot youth.

**Future Research.** This study utilized a qualitative design, allowing the participants to describe their experiences with wellness. The use of this specific design allowed the incorporation of a sacred, culturally-relevant, and widely recognized symbol of First Nations traditions as the foundation for this research. This study is an example for future researchers interested into the research of specific cultural groups of how cultural symbols and tools can be integrated into existing, Western research methodologies.

However, not all cultural symbols and tools can be integrated into research due to the sacred place of some symbols within the culture. This raises the question about whether all symbols and traditions of First Nations culture should be researched? What needs to remain within the community? This is a question that researchers should keep in mind when conducting future research with First Nations people. Future researchers will need to inquire with band and tribal councils of the communities they wish to conduct research in. Inquiry with council regarding future research is not only a first step in demonstrating respect towards the community, but will also minimize any triggers of mistrust and trauma, especially if a non-First Nations researcher is pursuing to enter the community to conduct research.

Another recommendation for future research about integrating cultural symbols and tools is to be cautious of distinctions between communities. Although the Medicine Wheel is widely recognized by many First Nations people (as well as Métis, Inuit, and Native American peoples), each community has its own distinctive interpretations of what wellness means to each community. Recognizing these differences will change the way future methodologies are constructed amongst sub-populations in First Nations communities.

If the current study was repeated, a larger sample size of participants may be beneficial not only to increase the trustworthiness of the results but also increase the breadth of findings. Conducting interviews with participants from more First Nations communities as well as representing different identity sub-groups (e.g., Ojibway, Mohawk, Blackfoot, etc.) may also be beneficial for future researcher. However, the experiences of First Nations youth may be just the beginning. Because community wellness was identified as part of the wellness for First Nations youth, further in-depth research may be required to investigate what other community members of different genders and generations have to say about their experiences with wellness (e.g., men, women, Elders, children, adults). Gathering further information will not only increase the breadth of information documented by these community members, but it will also increase the breadth of experience of the community as a whole.

### **Limitations**

Because of the cultural distinctions between communities, generalizability is clearly a limitation to this study. The experiences of the participants can speak much to the experiences of Cree First Nations youth; however, this may not be reflective of the



experiences of wellness with Ojibway, Mohawk, and Blackfoot youth. Although the goal of scientific research is often viewed as generalizing the results from a study of a population sample to a broader population (Creswell, 2007a), it would be insensitive and disrespectful to the culture if this study does not acknowledge these differences between and within groups and communities.

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Appendix A – Poster Advertisement

# Wellness Experiences of Youth

Youth aged 16 – 30  
who live in XXXXXXXX and area

I am doing my master's thesis on youth wellness and  
interested in your experiences.

If you would like to participate in the study, please  
contact Jamie Warren, Master's Student  
at  
(XXX) XXX-XXXX

I will be in the community between June 11 and 15,  
2012 to meet individually with those interested in  
participating

## **Appendix B – Letter of Information and Consent Form**

### **First Nations Youths' Experiences with Wellness: A Four Directions Approach**

#### LETTER OF INFORMATION

##### **Introduction**

My name is Jamie Warren and I am a Graduate Student at the Faculty of Education at Western University. I am working on my master's thesis and would like to interview you about your experiences of wellness.

##### **Purpose of the study**

The purpose of the study is to learn from youth about how they see their own wellness, how they describe it in the present and the future, as well as how they see themselves achieving their goals.

**If you agree to participate** in this study you will be asked to participate in a 30-60 minute in person interview that I would audio record at a time and place that is convenient for you. During the interview you would be asked about what wellness is to you, how you view it in your life, what you envision for your wellness and how you would achieve that vision.

##### **Confidentiality**

The information collected will be used for research purposes only, and neither your name nor information which could identify you will be used in any publication or presentation of the study results. All information collected for the study will be kept confidential. No names will be used in the report.

##### **Risks & Benefits**

There are no known risks to participating in this study.

##### **Voluntary Participation**

Participation in this study is voluntary. You may refuse to participate, refuse to answer any questions or withdraw from the study at any time with no effect on your status as a participant.

##### **Questions**

If you have any questions about the conduct of this study or your rights as a research participant you may contact the Manager, Office of Research Ethics, The University of Western Ontario. If you have any questions about this study, please contact my thesis supervisor Dr. Jason Brown at xxxxxxx@xxx.xx, or by telephone at XXX-XXX-XXXX xXXXXX.



**First Nations Youths' Experiences with Wellness: A Four Directions  
Approach**

**CONSENT FORM**

I have read the Letter of Information, have had the nature of the study explained to me and I agree to participate. I also agree to allow the interview to be audio-recorded. All questions have been answered to my satisfaction.

Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Person Obtaining Informed Consent:

\_\_\_\_\_

Signature of Person Obtaining Informed Consent:

\_\_\_\_\_

Date: \_\_\_\_\_

## Appendix C – Interview Protocol

### First Nations Youths' Experiences with Wellness: A Four Directions Approach

#### INTERVIEW PROTOCOL

How are you old? \_\_\_\_\_

Male/Female

- 1) What does wellness mean to you?
- 2) What helps you feel physically well?
- 3) What helps you feel emotionally well?
- 4) What helps you feel intellectually well?
- 5) What helps you feel spiritually well?
  
- 6) What vision do you have for your physical wellbeing?
- 7) What vision do you have for your emotional wellbeing?
- 8) What vision do you have for your intellectual wellbeing?
- 9) What vision do you have for your spiritual wellbeing?
  
- 10) How will you attain your vision of physical wellbeing?
- 11) How will you attain your vision of emotional wellbeing?
- 12) How will you attain your vision of intellectual wellbeing?
- 13) How will you attain your vision of spiritual wellbeing?

## Appendix D – Meaning Units by Code

The following are direct quotes by participants organized by code:

### Acceptance

*I guess a lot of things is accepting. Accepting things that happened. I had a hard time accepting the issues I've had, losing my mother and stuff like that... I guess it's just accepting, it's accepting what happens. I really don't know how to, I can envision the future and spirit but I guess accepting is probably the only word I can use. If I can move past things and maybe there is a bigger picture that I can't see right now that I might, you know, embrace in the future.*

### Approach to Wellness

*Wellness would mean like how you come from your health, your mental health, how you see what your life is going to be like. Are you happy? Your future...*

### Avoiding Stress

*... I started smoking 'cause it was a stress reliever, you know. So then I'm down with stress it's just like cigarettes. When I'm stressed all I'm going to be thinking about is a cigarette.*

### Being a Leader

*Being captain and all that and most of my games. Can't really say all of them (laughs). I always have to make game plans and everything and really figure out how things work and if someone else, like the opposing team were able to do something, how I can fix that and intercept that and stop them coming back against my place.*

### Being Self-Aware

*Yeah, it just... for me, and it keeps me thinking kind of thing and with my sports, I need to be aware of those kind of things and as my age, being a 16 year old girl living in the cities I'm going to be, to be aware of my surroundings is something that's gonna be good for me to do.*

### Being Successful

*Looking toward the future...Being successful.*

### Bettering Yourself

*Bettering yourself... I guess, a lot of that, like I said, learning from my mistakes, trying to use that to be successful in whatever I am doing.*

*No one likes angry people. Yeah. I don't know. My mom keeps telling me I gotta get an attitude adjustment.*

### **Controlling Emotions**

*I guess I could be a little less angry. Like, I don't know, sometimes its past, but I've seen worst like my little brother. I don't know. Just probably be a little less angry. You know, I'm not angry all the time but like, when I do get angry, it's like, unpretty I guess.*

### **Cultural Activities**

*Man, a good sweatlodge or a powwow... I don't know, it makes me feel cleansed. Something about a powwow gets my heart going, like the [omitted]boom boom. I don't know, you just feel better after, you know. And the sweatlodge, I don't know. It's hard to explain but you just feel pure coming out of a sweatlodge, you know what I mean? Plus I stay away from the booze and the weed for the 3 days before, too so, you know it feels good to be sober and all that, too.*

*Well I still like smudging and going to powwows and all that. So, that actually helps me feel spiritually well. 'Cause I feel like I am in touch with myself and with, like my background, like my native background and all that.*

### **Cultural Connectedness**

*Well, when I'm dancing... I don't know... it feels like I'm keeping connected with my culture and whatnot. So, and like, there's like, in our modern day, there's lots of Aboriginals don't do that anymore. So I'm happy that I am still interested in smudging and my powwow dancing and whatnot.*

*Well I want to keep doing it, like even when I'm older like even get my kids to stay in that kind of thing 'cause like, I think it's just good for me to stay in touch with my culture and whatnot 'cause it's just something I don't want to lose. It means a lot to my family, too. That's how I was raised. It's just... I don't know... it's a big part of me.*

### **Developing Trust**

*Wellness means like, to me it means getting better in life. In all that... I don't know what to say, but to me it means getting to help, talking to people that I can trust again, that I could be more like or something like that.*

*Move out. I'm not going to lie, I kind of blame all of my stress on them, like my family but we'll only know until I move out and then if I am still angry, I'll find a new way to get over it, You know what I'm saying.*

## **Doubt**

*I don't know... there's just a lot of things that make you doubt. I don't know... I just don't personally believe.*

## **Expanding Worldview**

*[Reading] ... It just helps me get knowledge and being knowledgeable. It helps me understand things and to see the bigger picture of things.*

*It's just... my mindset is that I like being happy and being positive. That's how I go around things. I take things day by day. I look to the future, you know, for bigger-picture type of things. But I don't like to make, you know, huge amount of steps and plans because a lot of times with those things, never everything really seems to go according to plan. So if you take things by day, take things step by step, instead of thinking about what's going to happen, you know, so in so time and time after that. You just take what happens now and move on to the next. So, you look... live now is what it is. I don't want to be planning too far into the future and you know, what if something happens and my whole plan is gone. So, you just take things day by day and stay happy and positive.*

## **Exercise**

*Being healthy, I guess. Like normally when people say you're well, it means like you're not sick... You're not sick, you're physically fit, you can run for a long time. I don't know. I'm not very healthy, so I can't run very far. I can run fast, but not far. Get out of breath lots, cough lots, headaches, I guess being healthy is the exact opposite of all that.*

## **Family Issues**

*Well I just turned 18 so I'm going to move the hell out. It's just... I love my family but you know, when you're together with someone for too long or like people too long, it just gets hectic and well all need our space.*

*Move out. I'm not going to lie, I kind of blame all of my stress on them, like my family but we'll only know until I move out and then if I am still angry, I'll find a new way to get over it, You know what I'm saying.*

## **Fear**

*Yeah. I think I changed a lot, more than I was before. I am still going through some stuff, but sometimes I feel like I can't talk to anyone sometimes, because I can't trust people and all but I am scared to go through what happened to me...*

### **Feeling Calm**

*Sports is what keeps me calm and like, I don't know, at base with myself. I've always been very athletic and with sports right now, I'm actually a professional athlete now. I'm pushing further on that.*

### **Feeling Down**

*Like right now, I haven't finished my schooling which is pretty bad and I have not been motivated by it. It's gotten me down a bunch of times.*

### **Feeling Loved**

*It makes me happy cause I'm talking to someone that really cares about me. That really wants to help me and is always there for me and that my spirit is like.... Smiling because I have friends who are gonna be there for me.*

### **Feeling Supported**

*A lot of times when I am feeling down, I just look for my support from my mom. My mom passed away five years back. But I mean, she was so supportive when she was here. She knew everything. She believed in me and it makes me feel better knowing that she is always there with me as well. She can help me get through a lot of things when I am not feeling well and I know she's there. That does help a lot.*

*Like I said before, talking to my mom. Talking to her more and more and more and more, and to let her make me feel happy again and make her get things out of my mind and to support me through anything.*

### **Felt Depressed**

*Well, due to things that have happened in the past, I was torn down to the point where I was in a depression kind of thing, so ever since then, I've had a counsellor and whatnot and I have actually been getting a lot better, emotionally-wise...*

### **Gaining Knowledge**

*I read up on things if that counts for anything. I read up on a lot of things, news articles over the internet and all. Try to keep updated on the world, how it's moving, what it's progressing towards... It just helps me get knowledge and being knowledgeable... it helps understand things and to see the bigger picture of things.*

*Helping out, I guess. Yeah... like listening to people about themselves and reading... Yeah, on the internet. I just read stuff on the Internet, the news, too. Helps me, "What's up?" Like knowing what's going on. Like, religions and different stuff.*

*Well, I want to be able to just... know everything like with my sports, like what's going on... Like I want to be able to look on the ice and be like, "Kay, she's going there, she's going there, and it's going to go in." Like right now, I've been working on that a lot lately and sometimes I don't always get them, but I'm doing pretty good at it. So, like, I'll sit there watching NHL games for hours and hours and even reruns, trying to see what they're doing. Getting ideas for myself so I can make my own plays and to figure out I can stop another play happening against my team in a defensive play.*

### **Gaining New Experiences**

*Yeah, the higher level you get at, the more scouts look at you. So, and like, I play in lots of different tournaments and whatnot so that, like I play for pickup teams everywhere 'cause I've played for different places so I get lots of phone calls asking to play for them on the weekends and what not, so which helps me get noticed even more. It gets me really excited, like... this year, first week of July, I am going to train with Team Canada and only 20 girls all over Ontario got asked.*

### **Happiness**

*I guess being happy and living a healthy lifestyle is probably what wellness means to me.*

*Myself being happy, I guess... I just, sometimes I feel like having a good life instead of like a depression life. But when I do stuff to keep my mind of things, like what I said to you before, makes me feel like I was never depressed. Like I was always a happy life.*

*Being happy all the time.*

*Wellness basically means to keep yourself, you know, happy and whatnot. Just take care of yourself, basically... yeah... Because, well who wants to be an unhappy person and whatnot and ungrateful. I think you should... keep your... how do I word that? Keep in touch with yourself and whatnot, make sure you're still... you know... 'cause like, no one wants to go unhappy if they want to keep in touch with themselves, physically, mentally, spiritually. That's just the way I look at it*

*... it's just being happy. It's not about how much I am getting paid. It's that I'm doing something that I want to be doing. That's what I find being successful is. You're doing something that you want to do, like say as a career. Being happy is the number one thing for me out of all things. Life is so short in this world that you could be doing something that you don't like for such a period of time and you're not being happy for your entire life. That's not what I... I prefer to be happy, 'cause things happen in random times. People pass away, accidents happen. You never know. So I mean, I'm just being happy.*

### **Having Fun**

*Joking around with friends and talking to them.*

## **Having No Regrets**

*Just be as positive as you can, work hard, and as long as you try not to feel bad about things. Another thing I learnt growing up is don't regret your decisions. Embrace the mistakes you've made in the past that you can work to better yourself or to not make those... you learn.*

## **Health Issues**

*I don't want to say... like something health happens. Like a health issues. I'm not being healthy, say, something is damaging my body from eating unhealthy, all the time, eating greasy food. Like getting high cholesterol or something, on those terms. Just try to stay healthy, and I know if you stay fit, a lot of those health issues won't follow.*

*I've been trying to eat better but it's hard. But I guess, in the future, I want to be able to eat better, I want to be healthier because there's problems that a lot of people have. A lot of my family from my mother's side have diabetes, so that's a risk as well that I could face if I continue eating unhealthily and stuff like that. And so, just trying to stay healthy and stay fit.*

*Yeah, 'cause I do have quite a bit of problems within, like my bones and whatnot. I don't know how half the bones in my body crack but they do (laughs)...It's challenging because there's so many other good players out there and you need to beat them to get there and there's a lot of other girls of course now with our modern day, like, girls' hockey has become a lot popular than it was back then. And there's a lot of girls looking at the same goal as I am right now, so proving that I am better than them will help me get there. So that's challenging...*

## **Honouring Friends**

*Biking with friends, 'cause I lost a couple of people from long time ago. Yeah. I just want to know them better, something like that... Yeah, 'cause a couple of the guys like to walk around a lot and bike around and exercise.*

## **Inspiring Others**

*When you've played hockey for as long as I have, you don't even notice it (the smell) half the time, but it just, I don't know, it just makes you feel really good about yourself. You went out there, you showed everybody what you can do, you've impressed people, and you've motivated and inspired others, it just makes you feel good about yourself.*

## **Journaling**

*I like to write about my problems. I like to write it, and then look at it in a couple of weeks. It helps me more, I guess.*



### **Lack of Spiritual Connection**

*You see things that happen... I just have a hard time believing there's something bigger there. A lot of people believe in God. I'm not trying to be controversial about it. I personally don't believe. I've been through things, I've seen things happen to other people that I don't believe that if there was truly someone there that... like things like this shouldn't happen. There's things in this world that just shouldn't happen and if there is something that, you know, as high as god that controls what goes on... I don't believe.*

### **Learning From Experiences**

*So I try not to... any decision I make, yes I make mistakes from time, everyone does. But, I try and stay positive and I have to learn from those mistakes instead of feeling bad about what you did and stuff like that. Just... move on.*

*...but I could learn though from my mistakes is that at least in the future, If I get to the point, like in college, I can't be slacking like I did, like I do. I put things off 'til the last minute, which greatly affects the quality of things, so learning from my mistakes, trying to be successful in like. I guess getting a job, going out on my own and being successful...*

### **Living a Healthy Lifestyle**

*Eating right, getting exercise. Just trying to be stress-free as much as you can.*

*I'm working out constantly, always doing something active just to keep like you know in shape. Keeping my endurance stamina well, 'cause I have lung problems, so doing things like that keeps me going.*

### **Looking Toward the future**

*Get a job, get money, and move on. Like moving down south*

### **Making Changes**

*I guess I really got to cut out what I eat when I eat my fast foods and go out to restaurants. I usually go eat at the restaurants like once or twice a week. I have a burger with gravy and it's all... it's probably about the greasiest thing you've ever seen. So, I got to cut down on eating stuff like that.*

### **Making Sacrifices**

*I mean, I don't get to see my friends anymore. I have no social life anymore (laughs), this is my social life. And of course, Facebook, like every other teenage child and everybody else on the planet.*

## **Overcoming Challenges**

*Yeah... like I don't... losing my mom at such a young age, too. That had a lot of big deal of issues. Like it's hard, and I see other people, I don't know. I understand that you're supposed to make things better for yourself but when things add on...I'm not just saying out of my personal experiences. I have seen friends who have through worse than me. I've seen people in the community that have gone through worse than me. It just makes me wonder anyways..*

*Honestly, I've tried to quit smoking lots but it's not a walk in the park. It's really hard. But you know, I keep trying every now and again. I got friends to help, too you know, but we always end up smoking again, even the breaks count I guess. But I don't know, normally when I try and do quit, I usually cut down first then... I just gotta get rid of stress first and then I won't need the stress reliever.*

*...I've play with boys since I was a kid and like, this past season I have played with the boys of course, we have to get ready for tournaments and whatnot. But they are a lot stronger than the girls, like I am used to playing with boys and used to their hits and whatnot, but like my legs and everything, my arms are right black after games sometimes from the bruising and all that 'cause I am a defenseman most of the time and I take all the pucks right? 'Cause when you're playing, you don't think, "Oh my god, I'm going to get hurt." You just get right into it and it gets bad sometimes. Like, I've had points where I've had slapshots, someone went for a slapshot and the stick actually hit me on my chin, splitting it open. Yeah, so... it gets a little too intense...*

## **Playing Sports**

*Playing sports, doing what I love to do.*

*Participating in sports and helping other people. That's what keeps me active all the time.*

*Mostly my sports. It just helps me feel physically well... After I play one of my games, I just feel refreshed and everything afterwards. Like, I just feel better.*

*Just... mostly my sports. It's a good workout.*

*I watch a lot of Discovery Channel so they look to me to say the smart thing, so it makes me feel like the smart one. I don't really show it at school, but that's just school, yeah. I don't know, it makes me feel smart.*

## **Pushing Too Hard**

*Even like... back to hockey... I could have a spectacular game but because I push myself too hard, too, that I will be down on myself and I'll go in my room and I'll even sit there and cry 'cause I'm so mad at myself for not doing as good as I should've... 'cause, I*

*just... continuously push myself to the point where I shouldn't and it's also caused me breathing problems and whatnot 'cause I push myself too hard in my sports.*

### **Quitting Smoking**

*I probably need to quit smoking. Probably need to do some better stuff for my lungs, maybe. But... other than that, abs. I probably need to quit smoking first.*

### **Releasing Emotions and Thoughts**

*I go for walks all the time. I'm usually walking around the lake with my girlfriend. I used to go for runs all the time. Playing hockey definitely helps relieve a lot of stress. A lot of anger gets out playing sports*

*To get stuff off of my mind, I guess.*

*What helps my spirit... I don't know. Talking to myself. Just to... and sometimes I cry.*

*I pretty much talk to myself sometimes. It helps me... sometimes it (talking) helps me take my pain away, but when I feel like it doesn't, I just go right to my mom or call my friends from out of town.*

*Just talking. Like, talking about what I have to say about things and what not. It helps me feel emotionally well to get everything off my chest.*

### **Relying on Support**

*I spend a lot of time with my girlfriend. We get along very well. We never fight. She's very supportive. She helps me when I am feeling down.*

*Talking to my mom. Yeah, talking to other people... Just talking, I guess about personal stuff.*

*Talking to my mom means a lot to me. She's my best friend. I can tell her anything. It makes me happy because if I can't talk to my friends, then I have someone else to go to.*

*Well, I talk to my counsellor sometimes and I talk to my parents and my friends are always there for me... It makes me feel, like, relieved because I don't have to keep everything in anymore. Everything is like out there and I don't need to hold anything down.*

*Buddies and sweatlodges, yeah... Just having people to count on, I guess. Maybe, I don't know... I guess strength comes in numbers.*

### **Rough Times/Past Experiences**

*I've been through some times living in my life so I know how bad things could get.*

### **School**

*...but I mean, I look at it... I know I can get it done. I'm slowly doing it through correspondence. I have a tough time working with writing and stuff like that. I have no motivation at all to do stuff like that. So it's taking me longer...*

*I have two years to graduate. I can't wait... I actually can't wait to graduate. 'Cause I'm excited to get out of this school and go to college.*

### **Self-Care**

*Just to keep in touch with my culture, like the powwow dancing, the drumming. I was going to get into the singing, but it's usually the guys I find do that more than the girls, so.... And yeah, the smudging, of course. That actually does help me a lot though, like after having a bad day, I'll go to the Friendship Center with [omitted] or something and we'll smudge. It actually makes me feel better. Like a great relief has been taken off.*

### **Self-Confidence**

*Dominant. Yeah, makes me feel like the alpha, just a bit. I don't know... confidence boost I guess.*

*I'm hoping to keep moving forward. Like, I've been doing these programs and these little worksheets and whatnot, and just talking to her, it's just helping me a lot and I'm hoping to the point where my confidence and whatnot will be higher than it is now 'cause I do have a low self-esteem due to like, of course, past events... so I'm hoping I could get over that.*

### **Self-Reflection**

*It helps me know what I am going through and that I have a positive way of getting out those problems.*

### **Sense of Community**

*There's times like there's powwows and I can't go. And I want to go so bad because it's me. I love my culture, so... 'cause I've got friends, too that I know who are drummers and dancers. You want to see them again and you feel so much better when you see them 'cause of their hugs and they're like a second family and all that. You know what I mean.*

## **Setting Goals**

*Coming to school, what I am doing right now, every day is what I am doing to attain my goal I guess.*

*Get a job, get money, and move on. Like moving down south... Yeah, like my vision, I want to be a police officer. I want to go to [omitted] police since that's my hometown.*

*Get a job so I can be on my own. I can finish my school and after that, just, you know, working and getting a career that I want to pursue. Like there's a lot of things I want to pursue but unfortunately, my marks can't... like I wanted to be an aviation mechanic. That would've been fun but my marks are nowhere near what's needed. So, I can look toward other things. I can see if I can be a helicopter pilot of some sort or... just things along the lines of that. Just trying to focus on what I want to do, not what's available, what's there. It's what I want to do, just work towards that. Even if it takes a longer road than most.*

## **Shower**

*If I get up and hung over or I feel sick, I take a shower... Something about a shower just revitalizes you.*

## **Socializing**

*Chillin' with my buddies... It helps me not think about stuff that make me sad, like, if I had a bad day, just chill with my buds and forget about it.*

## **Staying Involved in Activities**

*Being active, I guess. Like going to daily activities with people like basketball and baseball and parks. That's what keeps me going all the time.*

*It just, you know, keeps me thinking and all that. It just helps... it just makes me feel better. Everything is by athletics. I just base everything off on my athletics, like in my life.*

## **Staying Motivated**

*I mean, I go for walks with my girlfriend. Not as often as probably should. But with summer, with the nice weather, we'll probably be out all the time. I could go for runs like I used to. I've been meaning to go get a gym membership but it's expensive around here and I'm a little bit lazy. I need a little bit more motivation to get up and do things.*

*School keeps me going.*

*I don't know... I just happen sometimes. Sometimes I am very unmotivated and sometimes I will clean the whole house for no reason. I am a very on and off person. Like tomorrow*

*I might not want abs (laughs). Who knows? But, I don't know. Watch some motivational speeches. I don't really know how to motivate myself honestly.*

*It's just basically working out and pushing yourself harder and harder and harder every time. That's all you really got to do.*

### **Staying Positive**

*So when I see a situation, I see the brighter side and I know how much you could work toward something and you can get better, which eases a lot of tension on yourself, which eases a lot of tension on yourself. When you're thinking like... some people get down and all they see is darkness. They don't see anything else.*

### **Travelling**

*... travelling somewhere, trips... Going back to the places I was there before, like when I was younger.*

### **Working Hard**

*I just try and look forward toward the future, try and see the brighter side of things. Even though, things get bad but things can always get worse. Just got to make things better by working toward it, so I try not to be negative about anything.*

*Those are one of my goals is to finish high school and get to my diploma and go to school.*

*I'm not doing very good in school right now, so I should get on track. I only need 8 credits left and that's like a full year, so I need to make sure I don't fail anything. So that means I have to start going to school more and actually doing the work. See, the problem is I am smart enough doing the work. I show up once a month and do all my work in a period and I pass with about a 50, every year. Just, I need to get it in my mind to go to school and do the work all the time, and apply myself and get good grades instead of just average.*

*...when I get a car, it will so not be a problem to go to school. I don't go to school 'cause I live right here and I gotta walk to the high school every day. I really hate winter and I really hate being too hot and I just hate walking. So, when I get a car it won't be a problem, but I just got to force myself to go to school.*

*Well, right now I'm moving down south to [omitted] because I made the hockey team there and I made Team Ontario as well for Triple 'A' Girls' team but like, there's not enough teams that qualified for tournaments and whatnot, so I can't play with them until next year, hoping more teams will qualify. If not, I have to move over to the boys', which I kind of get nervous about sometimes. But I'm moving down south just to get myself*

*ready for that, 'cause when I am 18 I am going to a camp to see whether I am ready or not yet for Olympics , so we'll see how that works out.*

## **Appendix E – Themes by Code**

### Theme 1: Balance Strategies and Challenges

Exercise, Having Fun, Health Issues, Honouring Friends, Living a Healthy Lifestyle, Playing Sports, Quitting Smoking, Shower, Socializing

### Theme 2: Coping Strategies

Avoiding Stress, Controlling Emotions, Developing Trust, Journaling, Making Changes, Making Sacrifices, Overcoming Challenges, Pushing Too Hard, Releasing Emotions and Thoughts, Relying on Support, Self-Care, Staying Motivated, Staying Positive

### Theme 3: Emotional Balance

Doubt, Fear, Feeling Calm, Feeling Down, Feeling Loved, Feeling Supported, Felt Depressed, Happiness, Self-Confidence

### Theme 4: Worldview

Acceptance, Approach to Wellness, Being Self-Aware, Expanding Worldview, Family Issues, Gaining Knowledge, Gaining New Experiences, Having No Regrets, Lack of Spiritual Connection, Learning from Experiences, Rough Times/Past Experiences, Self-Reflection, Travelling

### Theme 5: Motivation

Avoiding Stress, Being a Leader, Bettering Yourself, Cultural Activities, Cultural Connectedness, Inspiring Others, School, Sense of Community, Setting Goals, Staying Involved in Activities, Working Hard



## Appendix F – Ethics Approval

  
**Western Education**  
**WESTERN UNIVERSITY**  
**FACULTY OF EDUCATION**  
**USE OF HUMAN SUBJECTS - ETHICS APPROVAL NOTICE**

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Review Number: 1110-8  
 Principal Investigator: Jason Brown  
 Student Name: Jamie Warren  
 Title: *First Nation's Youths' Experiences with Wellness: A Four Directions Approach*  
 Expiry Date: October 31, 2012  
 Type: M.Ed. Thesis  
 Ethics Approval Date: April 19, 2012  
 Revision #: 1  
 Documents Reviewed &  
 Approved: Revised Study Method, Revised Advertisement, Revised Co-Investigators

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This is to notify you that the Faculty of Education Sub-Research Ethics Board (REB), which operates under the authority of the Western University Research Ethics Board for Non-Medical Research Involving Human Subjects, according to the Tri-Council Policy Statement and the applicable laws and regulations of Ontario has granted approval to the above named research study on the date noted above. The approval shall remain valid until the expiry date noted above assuming timely and acceptable responses to the REB's periodic requests for surveillance and monitoring information.

During the course of the research, no deviations from, or changes to, the study or information/consent documents may be initiated without prior written approval from the REB, except for minor administrative aspects. Participants must receive a copy of the signed information/consent documentation. Investigators must promptly report to the Chair of the Faculty Sub-REB any adverse or unexpected experiences or events that are both serious and unexpected, and any new information which may adversely affect the safety of the subjects or the conduct of the study. In the event that any changes require a change in the information/consent documentation and/or recruitment advertisement, newly revised documents must be submitted to the Sub-REB for approval.

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Dr. Alan Edmunds (Chair)

**2011-2012 Faculty of Education Sub-Research Ethics Board**

<b>Dr. Alan Edmunds</b>	Faculty of Education (Chair)
<b>Dr. John Barnett</b>	Faculty of Education
<b>Dr. Farahnaz Faez</b>	Faculty of Education
<b>Dr. Wayne Martino</b>	Faculty of Education
<b>Dr. George Gadanidis</b>	Faculty of Education
<b>Dr. Elizabeth Nowicki</b>	Faculty of Education
<b>Dr. Immaculate Namukasa</b>	Faculty of Education
<b>Dr. Kari Veblen</b>	Faculty of Music
<b>Dr. Ruth Wright</b>	Faculty of Music
<b>Dr. Kevin Watson</b>	Faculty of Music
<b>Dr. Jason Brown</b>	Faculty of Education, Associate Dean, Research (ex officio)
<b>Dr. Goli Rezai-Rashti</b>	Faculty of Education, Associate Dean, Graduate Programs (ex officio)
<b>Dr. Susan Rodger</b>	Faculty of Education, Western Non-Medical Research Ethics Board (ex officio)

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**Jamie L. Warren**

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**AWARDS AND SCHOLARSHIPS**

Indspire Post Secondary Education Scholarship	2012
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Northern Ontario Education Grant	2011
National Aboriginal Achievement Foundation Endowment Fund	2011
Mohawk College Dean's Honours List	2010 & 2011
Laurentian University Bursary	2008
Ontario Native Education Counselling Association, Four Directions Scholarship	2005
Foundation for the Advancement of Aboriginal Youth Bursary	2005
Laurentian University Entrance Bursary	2005
Laurentian University Entrance Scholarship	2005

**PRESENTATIONS**

**Warren, J.** (2013, February). *First Nations Youths' Experiences with Wellness: A Four Directions Approach*. Paper presented at the Canadian Counselling and Psychotherapy Association Inaugural Research Conference, University of Ottawa, Ottawa, ON.

**Warren, J.** (2012, October). *The Growing Population of Aboriginal Youth: A General Look at What This Means for Canadian Society*. Paper presented at the 2<sup>nd</sup> Annual Emerging Realities Conference of the Department of Sociology & Legal Studies, University of Waterloo, Waterloo, ON.

**Warren, J.** (2012, March). *First Nations Youths' Experiences with Wellness: A Four Directions Approach*. Poster presented at the Western Research Forum of the Society of Graduate Students, Western University, London, ON.

**Warren, J.** (2012, March). *First Nations Youths' Experiences with Wellness: A Four Directions Approach*. Poster presented at the Annual Research Day of the Faculties of Arts and Humanities, Education, and Information & Media Studies, Western University, London, ON.

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**Intern Counsellor** September 2012 – Present  
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**Volunteer Support Counsellor** September 2012 – Present  
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**Field Placement Student** March 2011 – April 2011  
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### **PUBLICATIONS**

Billou, A., Davis, B., **Warren, J.** & Pickel, L. (2012). *A Working Together Process: In Search of Strengths and Change for Health in First Nations Children, Families and Communities in Northern Ontario*. London, ON: The University of Western Ontario.