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## Understanding Sources of Suffering and Pathways to Healing in Mi'kmaq Communities

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## **Abstract**

Despite enduring a range of atrocities, Mi'kmaq people continue to be resilient in the face of adversity. In collaboration with the Union of Nova Scotia Mi'kmaq and through discussions with eight Knowledge Holders, this research aimed to uncover sources of suffering and healing pathways in Mi'kmaq communities. Knowledge Holders identified salient sources of suffering including residential schooling and past policies, ongoing systemic discrimination, collective loss, and community conflict. Knowledge Holders emphasized the importance of engaging in wholistic healing practices that are grounded in Mi'kmaq culture, spirituality, and ways of knowing. Similarly, strengthening connections to culture, community, ancestors, and the land was described as a healing pathway. This research provides support for community-based services that promote healing through cultural revitalization.

## **Keywords**

Mi'kmaq mental health, Indigenous ways of healing, Indigenous resilience, intergenerational trauma, traditional healing practices

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### **Statements and Declarations**

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### **Author Contributions**

Conceptualization: A.O., A.J.F.; Methodology: A.O., A.J.F.; Formal analysis and investigation: A.O., L.M., A.J.F.; Writing - original draft preparation: A.O.; Writing - review and editing: A.O., L.M., A.J.F.; Funding acquisition: A.O.; Supervision: A.J.F.

### **Positionality of the Authors**

The lead author of this research (A.O.) is a member of Odanak First Nation. She is of white/European-Canadian and Abenaki descent. Anik Obomsawin has previously worked with off-reserve Indigenous communities in Mi'kma'ki to develop and implement cultural and educational programming. This work inspired an interest in conducting research that supports the programs and services in Mi'kma'ki that facilitate wellness through cultural reclamation. The co-authors (L.M., A.J.F.) are non-Indigenous white settlers who are committed to engaging in and supporting research that is aligned with the principles of truth and reconciliation. It is recognized that the authors not only lack a Mi'kmaw background, but have worldviews seeped in and influenced by non-Indigenous, Western culture. Given the fundamental differences between Indigenous and Western epistemologies, it was essential that Indigenous community partners be involved in the design, execution, interpretation, and dissemination of this research. This was done not only to limit any risk of biases or misinterpretations, but to ensure that this research was reflective of the values, priorities, and experiences of community members.

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## Understanding Sources of Suffering and Pathways to Healing in Mi'kmaw Communities

The Mi'kmaq are the founding People of what is now Eastern Canada and the Eastern seaboard of the United States. Mi'kma'ki, ancestral Mi'kmaw land, extends from the Gaspé Peninsula in Quebec to Newfoundland Island and the state of Maine (Hanrahan, 2008). As with many other Indigenous cultures in Canada, Mi'kmaw identity is deeply linked to the land (Landry, 2009; Paul, 2006). The interconnectedness between all living and non-living beings on Mother Earth can be captured by the Mi'kmaw phrase *msit no'kmaq*, which translates to “all my relations” in English (Marshall et al., 2007). The Mi'kmaq People often lived communally. Communities were composed of large, extended families and the land and resources were shared among all community members (Lelièvre, 2017). The Mi'kmaq engaged in seasonal, family migrations, following animal migratory patterns, and have a rich history as seafarers and knowledge of ocean ecosystems and fishing practices (Tobin, 1999). Impressively, the Mi'kmaq People had a sophisticated process of enforcing seasonal and spatial restrictions on gathering, hunting, fishing, and trapping to maintain balance in and show respect to the natural world (Paul, 2006). This governance system is in alignment with the philosophy of *Netukulimk*, which refers to the collective beliefs and behaviours surrounding the protection and management of resources which ensure prosperity for present and future generations. This ethic of responsibility and relational accountability to Mother Earth underlies the Mi'kmaw worldview (Denny & Fanning, 2016; Landry, 2009).

Tragically, connections to ancestral lands and traditional family and community structures have been disrupted by colonialism. Mi'kmaq People have endured a range of colonial processes that have resulted in a loss of language, land, culture, family, and traditional practices (Hanrahan, 2008). The centralization and residential schooling policies have had especially devastating effects on the Mi'kmaq People (Coffin, 2003; Hanrahan, 2008). Centralization, implemented in phases between 1916 and 1949, sought to assimilate Mi'kmaw communities by relocating them to designated reserves such as Millbrook, Sipekne'katik, and Eskasoni, disrupting their traditional migratory lifestyle and self-governance (Coffin, 2003; Hanrahan, 2008; Tobin, 1999). Families were forced to leave their homes, often arriving at unfinished housing, with government officials burning their previous dwellings to prevent their return (Coffin, 2003). These reserves lacked adequate land and resources, leaving the Mi'kmaq increasingly dependent on government assistance while also stripping Band leaders of decision-making power (Hanrahan, 2008; Tobin, 1999). Centralization fractured community structures, restricted access to traditional food sources, and resulted in overcrowding and economic instability (Hanrahan, 2008). At the same time, the residential schooling system furthered cultural erasure by forcibly removing Mi'kmaw children from their families, subjecting them to harsh discipline, forced religious conversion, and the suppression of their language and traditions (Walls, 2010). These policies not only inflicted immediate suffering but also caused lasting social, economic, and cultural trauma, the effects of which are still felt by Mi'kmaw communities today (Hanrahan, 2008). As a result of historical and ongoing colonial processes, Mi'kmaq people often experience significant psychological distress and trauma. Trauma of this nature is termed “intergenerational trauma” (hereafter “IT”), which refers to collective and cumulative psychological wounding over the lifespan and across generations resulting from shared group experiences. This trauma is best understood as impacting the individual, family, and the community (Evans-Campbell, 2008). However, the Mi'kmaq were, and continue to be, remarkably resilient in the face of historical and ongoing adversity. It is important to elucidate the community-specific protective

factors and healing pathways that confer resilience and promote wellness within these communities to break the intergenerational cycle of trauma from colonization (Gone & Kirmayer, 2020; Kirmayer et al., 2014).

While many studies have focused on the negative outcomes of colonization and IT, relatively few focus on resilience among Indigenous communities. Furthermore, the way in which mainstream psychology characterizes resilience and protective factors usually reflects a Western worldview, which often opposes Indigenous attitudes surrounding mental health and healing (Allen et al., 2020; Gone, 2013; Oulanova & Moodley, 2010). Given the differences between Indigenous and Western epistemologies, it is important to acknowledge that Western knowledge may not necessarily apply to Indigenous Peoples. Furthermore, in line with the concept of epistemic violence, attempting to understand and heal the mental health of Indigenous Peoples using Western ways of knowing may be harmful (Porsanger, 2004; Ray, 2012; Teo & Wendt, 2020).

In the relatively scant literature on Indigenous resilience, it is suggested that cultural factors can pave the way towards healing and wellbeing (Fast & Collin-Vézina, 2019; Gone, 2013; Smallwood et al., 2020; Snowshoe et al., 2015; Whitbeck et al., 2004). In a recent systematic review on the health and wellness of Indigenous youth across Canada, Australia, New Zealand, and the United States, authors identified that the main contributor to resilience and protection against negative outcomes was a strong connection to family and culture (Smallwood et al., 2020). Similarly, resilience research within the Eskasoni community has identified relational supports (i.e., family, Elders, friends, and community), engagement in culture, language, and nature, and wholistic education as being integral protective factors among Mi'kmaw youth (Liebenberg & Reich, 2016). Indeed, pride and participation in one's culture lead to a positive sense of self and cultural identity (Sasakamoose et al., 2016) and experiences of having purpose and meaning in life (Mohatt et al., 2011). As a result, cultural connectedness, typically defined as a strong sense of cultural identity, participation in cultural practices, and spirituality, has been positively associated with alcohol cessation (Stone et al., 2006; Whitbeck et al., 2004) and mental wellbeing among descendants of residential school survivors (Gray & Cote, 2019), and negatively associated with suicidal behaviours (Garrouette et al., 2003). Evidently, the very factors that were decimated through colonial processes may be the protective factors that promote resilience and wellness in Indigenous communities. This understanding has contributed to the "culture as treatment" theory, which claims that community-based practices that emphasize cultural and spiritual revitalization have the potential to mitigate impacts of IT beyond conventional clinical practices (Gone, 2013).

Many community-based wellness practices include traditional healing to address negative outcomes of IT (Oulanova & Moodley, 2010; Robbins & Dewar, 2011). Traditional healing practices vary across communities but often include connecting with the land, engaging in ceremony, and strengthening relationships with family and community members. These practices reflect a wholistic approach to wellness as they aim to promote spiritual, mental, physical, and emotional balance (King et al., 2009; Robbins & Dewar, 2011). Although the employment of traditional forms of healing varies across cultures, there is evidence that these practices are important in sustaining cultural identity, community connectedness, and promoting wellness in Indigenous communities (George et al., 2018; Kirmayer et al., 2003).

Despite evidence pointing towards the benefits of traditional healing practices, colonial mental health practices continue to be used to address IT in many Indigenous communities (Allen et al., 2020; George et al., 2018), including Mi'kmaw communities (Mi'kmaq Health Research Group, 2007). Mainstream mental health services are considered inadequate for addressing issues relating to IT in Indigenous communities because they seldom target community healing and cultural identity (Allen et al., 2020; Gone, 2013; Kirmayer et al., 2003). Although many scholars and clinicians have argued for the integration of traditional forms of healing in mental health services for Indigenous peoples, literature surrounding how mental health professionals can integrate these practices is lacking (Oulanova & Moodley, 2010). Furthermore, there are many misconceptions surrounding traditional healing practices in the literature as they are often interpreted through the lens of mainstream science (Robbins & Dewar, 2011), and most research on this topic is outdated (George et al., 2018). Finally, it is widely acknowledged that research on healing practices in Indigenous communities must be nation-specific. To date, there has been no research conducted to elucidate how traditional healing practices are used to address sources of suffering, and what healing pathways are most salient in Mi'kma'ki.

In collaboration with the Union of Nova Scotia Mi'kmaq (UNSM), the purpose of this research was to examine the use of traditional healing practices and the effect of these practices in mitigating IT in Mi'kmaw communities. Following an emergent qualitative research design and based on priorities outlined by Knowledge Holders involved in this research, this study explored the sources of suffering and pathways to healing in Mi'kmaw communities.

## Methods

### Indigenous Research Approaches

It is important to note first that mainstream psychological research in Indigenous communities has been used as a tool for colonization (Hart, 2010; Porsanger, 2004). Historically, Indigenous peoples have been used as objects of Western research; their culture and history have been essentialized and trivialized, and sacred Indigenous knowledge has been exploited to serve those in academic institutions (Porsanger, 2004; Ray, 2012). Therefore, this research followed the principles of Indigenous research approaches to ensure that the process was not only ethical and respectful but that it was also grounded in Indigenous epistemologies and reflective of Mi'kmaw culture and history (Wilson, 2008).

Indigenous research approaches consist of approaches and methods to produce knowledge that is grounded in Indigenous perspectives and is beneficial to Indigenous communities. Although the employment of these approaches varies across studies and communities, there are some common components. Firstly, the local community should have control over the research agenda, methods, and how research findings are disseminated (Hart, 2010; Marsh et al., 2015; Smith, 2014). In other words, the Indigenous community or Indigenous partners are considered equal co-investigators as well as sources of knowledge that inform the research. Relatedly, Indigenous research approaches rely upon the value of relationality. Researchers must prioritize building relationships and trust with community and acknowledge that relational methods are key to establishing meaningful outcomes. Indigenous research approaches also often include strength-based components such as healing pathways (e.g., regaining physical, mental, spiritual, and emotional health), decolonization (e.g., cultivating governing systems

and maintaining sovereignty), as well as the survival of Indigenous culture, traditions, and language (Marsh et al., 2015; Wendt and Gone, 2011). Regardless of the extent to which strength-based approaches are employed, there is often a goal to uncover effects of colonialism, acknowledge oppressive power structures, and situate research within these contexts (Wendt and Gone, 2012).

### **Community Engagement**

This research was conducted in collaboration with the UNSM, an organization which provides counselling, traditional healing, guidance on navigating mental wellness services, and community programs and workshops to promote wellness in Mi'kmaw communities across Nova Scotia. The executive director and cultural advisor of the UNSM informed the research team on the research questions that are relevant to the community and were consulted during all aspects of the project, from research design to dissemination.

### **Interviews with Knowledge Holders**

Knowledge Holders were recruited via three methods: 1) email invitation sent from the UNSM, 2) a Facebook post shared in a group for Indigenous people in Mi'kma'ki, and 3) through relationships the lead researcher formed through engagement with Mi'kmaw communities. Eight Mi'kmaw individuals who work to promote wellness within Mi'kmaw communities across Mi'kma'ki participated in one-on-one, semi-structured interviews either virtually over video conferencing or in-person at a location of their choosing. Two of the eight Knowledge Holders grew up, live and work on-reserve; two Knowledge Holders grew up, live and work off-reserve; and four Knowledge Holders have lived and worked in both on- and off-reserve communities throughout their lives.

The interviews were informed by a flexible guide reviewed by community partners. The interview addressed the following research questions: 1) What are the lived experiences of IT?; 2) What are the impacts of IT with respect to wellness?; 3) What are the protective factors and practices that minimize the impacts of IT and promote wellness and healing?; 4) How and when are Traditional healing practices employed?; 5) What are the most important components of Traditional healing practices?; 6) How do Traditional healing practices minimize the impacts of IT and promote wellness and healing?; 7) What practices or programs that are not currently in place should be available to promote wellness and healing?; 8) What are the recommendations for mental health practitioners providing services to Mi'kmaq people? Interviews followed a conversational approach to allow participants to discuss whatever topics were relevant to their lived experiences. Consequently, the focus, location, and duration of individual interviews were largely guided by the Knowledge Holders. Interviews were transcribed verbatim, and transcripts were sent to Knowledge Holders to provide the opportunity to remove or add information.

### **Thematic Analysis**

Transcripts were analyzed using an inductive approach in which themes were generated based on data from interviews rather than pre-registered hypotheses or preconceived theories (Braun & Clark, 2006). Such an approach to analysis ensures an interpretation that is guided by and representative of the

experiences of community partners. First, transcripts were reviewed independently by three members of the research team. Once familiar with the transcripts, initial codes were generated, and relevant quotes were manually extracted and collated to demonstrate each code. Employing a reflexive approach, the researchers met throughout the coding process to discuss observations and potential biases. Codes were then grouped into potential themes. Thematic maps were then generated to analyze the relationships between codes, sub-themes, and themes. The researchers reviewed all transcripts again to ensure that the codes and themes reflected what was shared by Knowledge Holders (i.e., not imposed by the researcher). Finally, themes and subthemes were defined and named in ways which most accurately reflected the stories and experiences shared by Knowledge Holders (Braun & Clark, 2006).

### **Ownership, Control, Access, and Possession**

In line with principles of OCAP® (First Nations Information Governance Centre, n.d.), each Knowledge Holder has ownership over their personal data. Knowledge holders were also provided with the option to disclose their name to acknowledge and honour the experiences and knowledge that they share. To support confidentiality, community partners have ownership of the themes that are generated and select quotes that have been reviewed by Knowledge Holders. Preliminary findings were shared with community partners and Knowledge Holders, and their feedback was incorporated into the revision, elaboration, and interpretation of themes. This process acknowledges that knowledge is not individually produced but rather, it is relational and collective. This approach also allowed for Knowledge Holders and community partners to share control over the interpretation of knowledge. In collaboration with community partners, the research team has ensured accessibility of the research findings. The UNSM and all Knowledge Holders involved in this research will indefinitely possess documents that are generated during the process of analysis, interpretation, and write-up. Finally, as mentioned above, the executive director and cultural advisor will inform the research team on how best to disseminate the research findings to the community. We aim to honour the values of oral dissemination of knowledge by disseminating final results orally to the UNSM in a manner that will be determined by this organization.

Power relations between the researcher and knowledge holders were in part addressed by tailoring research to the priorities of Knowledge Holders and community partners, allowing knowledge holders to guide the interview sessions, ensuring Knowledge Holders and community partners have ownership and control over the knowledge shared, centering the voices of Knowledge Holders, and disseminating results back to the community. However, we acknowledge that power imbalances cannot fully be addressed because this research also serves to advance authors' positions within academia, an institution that has a legacy of privileging colonial perspectives and marginalizing Indigenous knowledge, voices, and culture (Hart, 2010). This research was approved by the Toronto Metropolitan Research Ethics Board (REB # 2022-241).

### **Results**

Analysis of the interviews revealed two broad overarching themes: *Sources of Suffering* and *Healing*. A visual representation of the themes, sub-themes, and codes generated from interviews is presented in Figures 1 and 2.

## Theme 1: Sources of Suffering

Five sub-themes fell under the theme Sources of Suffering, including: 1) residential schooling and past policies; 2) systemic racism and discrimination; 3) collective loss; 4) physical and emotional suffering; and 5) community conflict and shared grief. Please see Supplemental Table 1 for relevant Knowledge Holders quotes that represent each sub-theme.

### Subtheme 1: Residential schooling and past policies.

Knowledge Holders shared sources of suffering that are rooted in historical colonial policies. One of the most salient sources of suffering was residential schooling, which instilled feelings of shame and stripped children of their language, community, culture, and identity. One Knowledge Holder shared, “you’re literally in a prison camp... you grow up in that very cold, hungry environment...” (Anonymous 1). The Knowledge Holders shared that profound trauma experienced from the physical and emotional abuse in residential schools affected some survivors’ ability for self-love and to show love to others, including their children. Melanie shared, “They grew up taken away from their families, and when they were in these institutions, they didn’t experience love. They were never taught love.”

Colonial policies and practices stripped individuals of their identity, language, and purpose. These policies were described as traumatic and responsible for almost eradicating Mi’kmaw culture. As Richard shared, “The *Indian Act* banned our ceremonies... The life expectancy in 1956, the year that the *Indian Act* was amended, was 68.9... So, if you were born in the beginning of that, you never got to practice your culture.”

### Subtheme 2: Systemic racism and discrimination.

Current-day colonialism experienced through ongoing racism and discrimination, and structural racism rooted in policies and practices not only discriminates and segregates but also re-traumatizes. Continued deprivation of basic needs such as access to food, shelter, and clean drinking water on the reserve was seen as a source of suffering that resulted in conflict within the community as community members are left “fighting over scraps” (Anonymous 1). Systemic challenges are also experienced by those who try to move off the reserve, which was described as an invisible entrapment: “... you don’t know how to survive outside...you can’t just walk off and leave when you’re already struggling here... these reservation boundaries that the government created are actually like an electric fence” (Anonymous 1).

Knowledge Holders shared the continued mistrust of institutions, including healthcare, child welfare, and the criminal justice system. Shay shared that child welfare “was just constantly feeling like you’re being monitored and so that was a big stress on us... feeling like we can be taken away at any time.” Knowledge Holders also shared frustration surrounding the lack of education and acknowledgement of Canada’s colonial history within non-Indigenous settler communities and the education system. Furthermore, the imposed expectations for Indigenous people to rectify this ignorance by educating non-Indigenous people about colonialism were described as potentially re-traumatizing in and of itself. This lack of education is particularly harmful as it is integrated into Western mental health systems. As one Knowledge Holder shared, “... they didn’t know the demographic. They didn’t know how this

community works because they sign in at nine o'clock and they sign out at four o'clock" (Anonymous 1). Indeed, non-Indigenous health services were said to lack a true understanding of the community and thus cannot respond to community needs appropriately. The complexity of trauma resulting from colonialism is further highlighted in discussions of intersectionality. Knowledge Holders discussed the fact that intersecting marginalized identities "increases... risk of harm and violence" (Jordan), highlighted the unique challenges that bi-racial and LGBTQ2S+ Indigenous people face and stressed that data must be collected in ways that reflect these unique challenges.

### **Subtheme 3: Collective loss.**

Both historical and ongoing colonial processes were said to have resulted in collective loss of language, culture, connections to community and the land, connections to Elders, identity, and purpose. The collective loss of language was discussed as profoundly intertwined with loss of culture: "if we don't have our languages, we don't have our culture" (Jordan). Because the *Indian Act* banned culture for 70 years, the loss of culture experienced by on-reserve and off-reserve Indigenous Peoples is thought to be overwhelming, contributing towards feelings of hopelessness and the emergence of pan-Indigeneity. As Little Bear shared, "I don't speak my language. There are so many teachings that were lost. And yes, we're trying. My generation is finally starting to reclaim it... But all that was lost in those generations in between... There's so much that we don't know."

Most Knowledge Holders discussed the devastating effects of Mi'kmaq people losing connection to the land due to displacement from ancestral lands that were used to pray, harvest medicines, fish, and hunt, as well as environmental degradation and the prevalence of man-made structures and noise. The severed connection between Mi'kmaw individuals and their ancestral lands was thought to threaten cultural continuity and the maintenance of traditional ways and roles. This was said to contribute toward the loss of identity and purpose and, in turn, promote feelings of depression, unhealthy coping, and community conflict. Knowledge Holders also shared the worrisome disconnect between youth and Elders, which is thought to stem from community members being "afraid to seek guidance from Elders because of the trauma they've been through" (Shay). This loss of connection to community and Elders is thought to threaten the transmission of cultural teachings and promote feelings of not belonging. Shay urged, "We need to come together and bridge that gap... be able to learn from each other, be able to pass down teachings."

### **Subtheme 4: Emotional and physical suffering.**

The emotional and physical suffering of Mi'kmaq people, including mental health ailments, cancer, stroke, and substance dependence, was attributed to current stress and IT that is passed on through the blood, from one generation to the next. This intergenerational transmission of trauma, referred to as blood memory, may not only impact direct offspring, but also the entire Mi'kmaw community.

Knowledge Holders reflected on the vicious cycle of internalized shame that began with their Elders, who first experienced shaming through residential schooling. Parents who survived the residential school system were said to sometimes exhibit poor parenting abilities because they are "functioning in a place of survival" (Richard). This was described as a factor in continuing the cycle of trauma: "for any

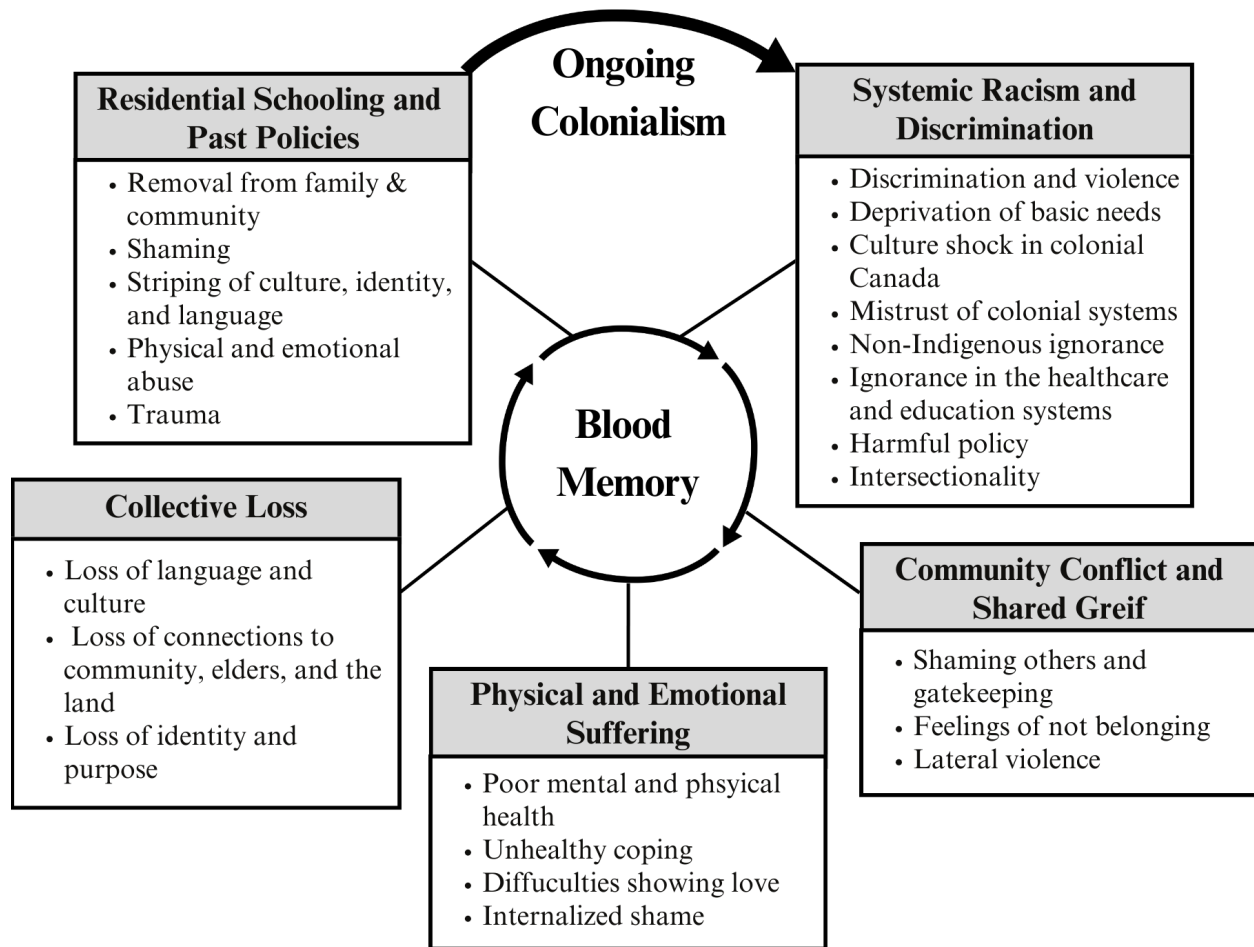
residential school survivor or any person who experiences trauma as a child... when they grow up, they're still gonna bring it with them and they're gonna pass it on..." (Melanie). This internalized shame continues today due to the presence of systemic discrimination and resulting barriers present in colonial Canada.

Internalized shame from one generation to the next, coupled with loss of culture, results in unhealthy coping behaviours. Wasuek shared that community members "haven't had to practice emotional regulation, they haven't processed any emotions, because they've been self-coping with drugs and alcohol, so they've never actually had to sit with their feelings or sit with themselves." Knowledge Holders also described feelings of shame associated with not knowing enough about their culture. Through the loss of culture, there is a loss of sense of self, sense of belonging, and feelings of "I'm not good enough" (Jordan).

### **Subtheme 5: Community conflict and shared grief.**

Related to the theme of collective loss and suffering, Knowledge Holders shared the presence of conflict within the community, much of which stems from shared grief. Instances of community members shaming one another and gatekeeping ceremony, feelings of not belonging to the community, and lateral violence were discussed. Wasuek said, "It's really ugly because I see the impacts that intergenerational trauma has had on our people through substance abuse, through violence... and it's all tied back to residential schools."

Out of desire for cultural preservation, Mi'kmaq people were said to sometimes shame one another for not knowing the language, not engaging in ceremony traditionally, not looking Mi'kmaw enough, and not attending enough ceremonies. As one Knowledge Holder remarked, "My mom's an immigrant from the Netherlands, and then my dad is Mi'kmaw... mixed Mi'kmaw... so there's that sense of 'where do I belong?', because I never quite fit in with one or the other" (Anonymous 2). This desire for cultural preservation can lead to gatekeeping where some community members are rejected from ceremony because of substance use, criminal offences, or a lack of cultural knowledge. Richard described the impacts of rejection from community: "We dehumanize folks even more when we don't let them practice their culture... we cannot take individuals who have already experienced so much trauma and then lump even more trauma on and say, '...we don't want you'. This rejection is even more impactful when it stems from one's community: We've all been told that long enough, and it bites that much more when it comes from our own people... Canada rejects Indigenous people, and then we reject one another based on other criteria, and these are all colonized frames of mind" (Richard).



**Fig 1 Themes and codes relating to sources of suffering as identified by Knowledge Holders**

**Theme 2: Healing**

Under the overarching theme of Healing, Knowledge Holders shared stories relating to two sub-themes: healing pathways and healing promoters, both of which were further divided into four additional sub-themes.

**Subtheme 1: Healing Pathways**

Regarding healing pathways, Knowledge Holders brought to light four underlying themes: 1) healing practices; 2) creating and strengthening connections; 3) opening up a sharing; and 4) an observed shift toward healing. Please see Supplemental Table 2 for all relevant quotes that represent each sub-theme.

**Healing practices.** Traditional healing practices (e.g., sweat lodge ceremonies, smudging, singing and dancing, drumming), wholistic healing, reconnecting with Mi'kmaw values and teachings, and prayer and spirituality were shared as important, tangible practices that foster pathways to healing. Melanie shared, "I like to smudge every day because it helps me feel grounded and connected to my culture and it just... it feels good." Learning about and exposure to traditional healing practices boosts confidence and

connection to self, creating a sense of purpose. It was said that people often don't know that there is a need for traditional practices until they are exposed to them. Recreating and recovering traditional practices was said to be a source of pride and connection and allow for “mending our hearts” (Little Bear). Shay shared, “It's just so heart-warming to see people being very engaged in their culture when they felt like they couldn't.”

Ceremonies were described as cleansing and important in fostering connection with community, with Mother Earth, and with oneself. For example, Melanie expressed that her first sweat lodge ceremony, “helped [her] more than any therapy session” and left her feeling “very, very whole.” Indeed, Richard shared “Ceremony is empowerment... it gives us the recognition of self that we all too often don't have because we are functioning with surviving and coping... It celebrates identity and self.” Furthermore, the medicine wheel was respected as a powerful navigational tool to guide healing in ways that balance the four realms of wellness, taking a wholistic approach to healing. In describing the medicine wheel, Shay said, “In order for your life to be well balanced and happy, you have to have your medicine wheel balanced... Healing is so much more than just your mental health.”

**Creating and strengthening connections.** Strengthening connections to community, culture, ancestors, and the land were shared as important healing pathways. This sub-theme also included the return to the teaching of *msit no'kmaq*, the idea that we are all connected to one another, to all living and non-living things on Mother Earth, and our ancestors. As Jordan shared, “In Mi'kmaq we say *msit no'kmaq*. It means ‘all our relations’. And that means our relations to our ancestors, to the land, to the plants, to everything around us, the people, the water... We can't see ourselves as separate from the things around us and that are impacting us.” Reconnecting to culture with community members and celebrating culture was important for “connecting back to your roots, learning about yourself” (Melanie). In line with this, Knowledge Holders also stressed the value of creating a sense of community for those off-reserve and the importance of welcoming allies and people from different cultures, including Afro-Indigenous communities, to cultural events to foster global connections and to learn together.

A return to traditional values was viewed as having a “positive mental health impact” (Jordan). Knowledge Holders explained that cultural reclamation, be it pan-Indigenous or nation-specific, is “a step in the direction towards the reclamation of self-identity and defining the self” (Richard). Furthermore, exposure and connection to cultural roles were said to promote a sense of purpose. Just as blood memory was described as the mechanism by which suffering is passed down through generations, blood memory was also described as a mechanism by which individuals heal through cultural reclamation: “When you do arts and crafts, that's blood memory. What that means is, your ancestors did that. So, when you're doing something that your ancestors did, it just genetically triggers something in your memory that makes you feel good, and you don't even know why” (Anonymous 1).

Connection to the land was described as one of the most important components of healing and was said to help individuals find “pieces of light that get brighter and brighter” (Anonymous 1) in the darkness. Connection to Mother Earth was said to strengthen relationships with culture, “wake that ancestral knowledge” (Wasuek), and promote “a sense of identity...a sense of pride” (Anonymous 1). As a result,

on-the-land healing was described as an essential alternative to "clinical and prescribed spaces" (Wasuek) represented in Western therapy models.

**Opening up and sharing.** Talking circles were described as "one of the most powerful medicines" (Little Bear) and emphasized that Mi'kmaq people sharing experiences with one another is an essential alternative to care by Western mental healthcare providers. In comparing the power of talking circles relative to conventional Western therapy, Little Bear shared, "being with the people who can teach you about it [trauma]... Listening to them, singing with them, drumming with them, smudging with them... is much more comfortable in my opinion." Sharing stories with like-minded people who have gone through similar experiences was described as having the potential to foster a sense of belonging and healing. Through opening up and sharing past and current traumas, Mi'kmaq people can better understand their suffering. When discussing the sharing of trauma, one Knowledge Holder shared:

It helps tremendously... A lot of our clients break down cryin' at this part because they're hurtin', right? When you're hurtin' all your life, and you're surrounded by hurt, you're depressed... You feel like you're broken... So, when I tell them it's not their fault, that's very, very powerful... nobody's ever told them that it's not their fault. (Anonymous 1)

Learning about and sharing experiences of trauma was said to reduce shame and guilt associated with outcomes of IT and was viewed as essential for "beginning... (the) journey to healing" (Anonymous 1). This healing pathway was represented by the sacred teaching of Truth, which emphasizes the importance of understanding, speaking, and feeling the truth, while also honoring its power to allow us to act without regret. Accordingly, Knowledge Holders stressed the importance of acknowledging the truth of colonialism.

**Shift to healing.** Many Knowledge Holders shared that they are seeing a shift. This shift to healing is seen in various ways, including a shift away from unhealthy coping behaviours, such as substance misuse, to "more of a cultural-based healing" (Wasuek), including cultural reclamation, promoting pride and confidence while reducing shame and guilt, fostering a sense of belonging, strengthening identities, creating feelings of purpose and hope, and intergenerational healing. Such a shift was described in parallel to "following the red road" (Wasuek), which signifies a commitment to living life in a healthy, spiritual, and respectful way. Knowledge Holders described a sense of pride associated with uncovering traditional practices, connecting with ancestral knowledge, reclaiming culture, connecting with the land, and embracing Indigeneity. Finding and recreating traditional healing practices was seen as being "part of the healing of reconnecting with them" (Jordan). Jordan further shared, "It does bring a sense of pride and connection when you're able to incorporate things that make you feel connected to the earth and your people and the way of being that we believe in." Importantly, this observed shift to healing was said to span across generations, as Knowledge Holders shared stories of intergenerational healing. Elders were said to provide wisdom and guidance to youth, and youth were said to encourage pride and confidence in their Elders as they witness a passion for learning about culture and an acknowledgement of the need to heal. Shay shared, "A lot of times, we'll just sit as a group and the Elder will give teachings and then at the end of it... the smiles! Just see the weight that kind of gets lifted off of them and, at the end of it, to be able to go home happy."

## Subtheme 2: Healing promoters

Knowledge Holders outlined four factors that help to facilitate the journey to healing: 1) creating space; 2) ally support; 3) resilience; and 4) hope for the future. Please see Supplemental Table 3 for all relevant quotes that represent each sub-theme.

**Creating space.** The term space was used in several ways, including physical, emotional, and metaphysical space. While teachings and rules are important in preserving culture, Knowledge Holders shared the importance of creating space to allow teachings to evolve to accommodate modern realities, and to reduce gatekeeping. As Richard shared, "... it's time now for us to begin to add more to that skeleton...and that's the L'nu way anyway... 100% cultural competency is impossible because culture always grows... Our teachings must also then be in perpetual growth." This increases access for people who may not engage with practices traditionally because they cannot be sober for four days before ceremony or are just starting on their path to cultural reclamation. Reflecting on community members who self-soothe through alcohol consumption, Richard shared, "We want to show you better coping mechanisms, but when you hear 'you have to wait four days before you come in', you hear 'I'm not allowed'...It's important not to condemn people." Knowledge Holders expressed the need to create spaces that are accepting, forgiving, and understanding of the fact that "we're all Mi'kmaq, we're all hurting" (Wasuek). This inclusivity extends to providing space for teachings from other Nations and providing space for people of intersectional identities and LGBTQ2S+ individuals.

Providing space to connect with community members in an alcohol- and drug-free environment was said to be important for encouraging healing. As Wasuek reflected, "there are more people attending these drug- and alcohol-free events... From young children to Elders. Whereas before, they didn't have a place to go because everything was catered to that drinking... the partying." Furthermore, access to a *consistent* space was emphasized, as consistent engagement in culture and community fosters healing. As Shay shared "for a lot of them just to get that day-to-day interaction with other people that understand your background, where you come from, your struggles, it's very important." The importance of consistency is represented by the sacred teaching of wisdom, which emphasizes the necessity of continually working to improve oneself and one's environment in a sustainable way for the benefit of one's family. Without consistent community supports comes the risk of reverting to unhelpful patterns. As Shay shared, "once that was taken away, you can notice people going back into their old habits. That was a big social thing for a lot of people, and once they lost it, they didn't know where else to go, except back to their old way."

**Ally support.** This sub-theme encompassed considerations for allies, including the importance of forming authentic relationships, building trust with the community, learning about the culture and history of the community, acknowledging privilege and Indigenous trauma from colonialism, offering services that are tailored to the community, and incorporating Mi'kmaq practices. Knowledge holders called for these services on-reserve as well as "for people who are living off-reserve because they aren't in their community" (Melanie). The importance of building relationships was discussed in the context of the criminal justice system, education, and the healthcare system. Given the harm done by colonialism, building trust when working with Indigenous communities is considered essential.

To support the healing of Indigenous people, allies are encouraged to learn about the community they are working with, to acknowledge past and present colonial practices that have harmed Indigenous peoples, to unlearn their colonial ways to some extent, and to recognize their privilege. Non-Indigenous healthcare workers cannot expect to be helpful if they do not understand the community they are working with. As Melanie said, “I think it’s really important that non-Indigenous organizations truly are motivated to understand the history and plight and experiences that we faced and how it affected us.” Knowledge Holders encouraged seeking this knowledge from community members rather than external sources but also noted that non-Indigenous supporters need to respect that they need to wait to be invited to community events.

Ally supporters should aim to center the voices, experiences, and perspectives of the community they are serving. It was said that services should be flexible and shouldn’t follow a one-size-fits-all colonial structure or predefined theory. This Western system clashes with Indigenous Peoples, as “First Nations people are not like that. First Nations people don’t go wall-to-wall. We didn’t have reservations and boundaries. We were free. We were everywhere. So, we went with land... how the land flowed” (Anonymous 1). The incorporation of Mi’kmaq practices and approaches to healing was said to be essential to increase the efficacy of services. As Little Bear shared “...going into it with the understanding that maybe you need to stand up and go outside with them while they smudge... Maybe you need to take a break so they can drum... come in with an open mind more than anything else.” As the individual and their culture are seen as one, Little Bear shared that not supporting cultural practices sends the message of “I’m only letting this little part of you come into this session.”

**Resilience.** Knowledge Holders described the remarkable resilience of Mi’kmaq people and explained how this resilience promotes healing. Knowledge Holders identified that, given everything Indigenous people have been through, “just being alive and identifying as Indigenous people is resiliency on its own” (Jordan). Despite nefarious colonial policies and practices that planned the genocide of Indigenous people, the Mi’kmaq language has been preserved, and there is a “strong urge from...youth to learn the language” (Jordan). Faced with adversity, the Mi’kmaq people continue to engage with traditional practices and ways of being. Little Bear shared, “We sing our songs, we speak our language... We raise our babies the way that our ancestors, we hope, would’ve raised their babies... We take the teachings that we know, and we very diligently try to enforce them.” While previous generations were made to feel shame for their Indigenous culture and identity, younger generations are displaying more pride and, with this growing pride, there is a passion to learn about their culture and desire to heal. Little Bear eloquently said, “Honestly, you wanna talk about resilience? This entire community being here is resilience.”

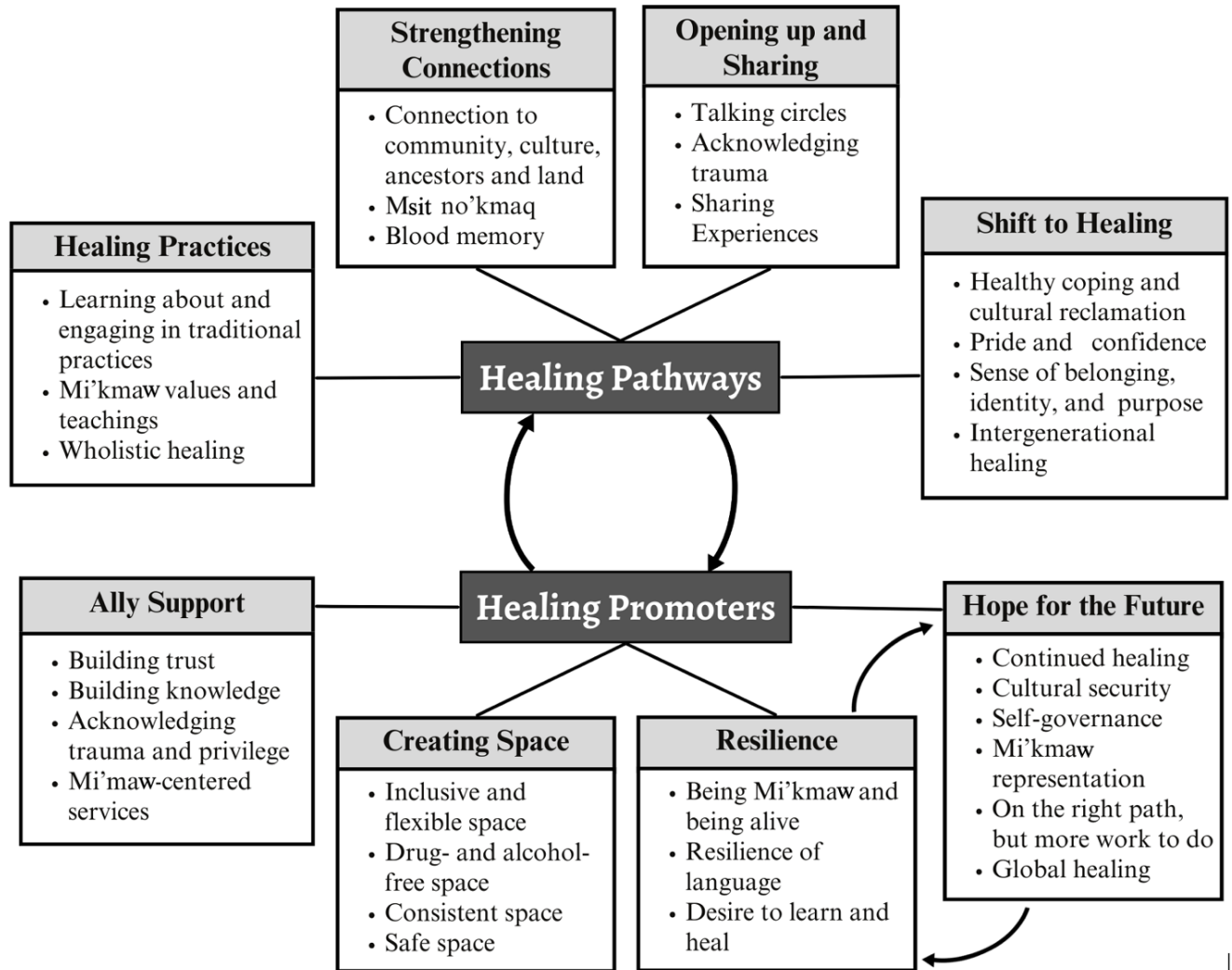
**Hope for the future.** This final sub-theme was largely connected to that of resilience, as they feed into one another. While some were more hopeful than others, Knowledge Holders expressed great hope “that Indigenous people will continue to be resilient, and they will continue to heal... (and) Indigeneity will be something that ... other Canadians recognize for its beauty and its knowledge” (Jordan). Knowledge Holders also hope that Mi’kmaq people will continue to be passionate about cultural preservation and continue to become culturally secure. There was hope that future generations would continue to grow proud of their culture, want to be Knowledge Holders themselves and be able to pass down teachings to subsequent generations. Wasuek shared “I hope that we get to a place where we are

culturally secure in our language, in our way of being, that everyone is at that level and we're just supportive, everyone's trauma-informed and we're moving towards a new way of being, a Mi'kmaw way of being."

Knowledge Holders also expressed hope for self-governance and self-determination. Knowledge Holders expressed the need to recognize that "We are two independent Nations sharing land" (Jordan). The importance of self-governance was shared in the context of deciding Nation membership, training community members to be service providers and Elders, and programs being created for Mi'kmaq people by Mi'kmaq people. Knowledge Holders also shared hope for greater representation within colonial systems, disaggregated data on Mi'kmaw health and wellness, and Mi'kmaw-specific healthcare information and practices. As Melanie said, "When I walk down the street, I would love to see more culture, more language... more of me in the world, other than just on the reserve."

Knowledge Holders explained that "we're going in the right direction" (Melanie) with regard to healing, growing pride, awareness of IT and Mi'kmaw history, funding for cultural programming, opportunities to learn culture, and access to healing practices. However, it was widely acknowledged that more progress is needed to eradicate stigma and harmful systemic policies and practices and to increase funding that supports cultural practices and healing for Mi'kmaq people, by Mi'kmaq people. Regardless, Knowledge Holders expressed an inspiring hope for the health and wellness of communities on a global level. The systemic barriers facing Mi'kmaq people were often discussed as being in parallel with issues that are facing other populations around the world. On the topic of hope for global healing, Jordan captured the importance of shifting away from "selfish, Western, every-man-for-themselves" values and towards Mi'kmaw teachings:

When we talk about the issues that matter most in the world today, climate action and ending poverty and discrimination, we have a lot of knowledge to contribute to that. If we were to completely listen to Indigenous folks and understand their way of life, I think we would see a much healthier world, healthier people, healthier lands, healthier waters, oceans, plants, birds, fish, rocks. So, I hope that we could get to a point where we're acknowledging and engaging Indigenous folks in the future that we all want as a global community.



**Fig 2. Themes and codes relating to healing pathways and promoters as identified by Knowledge Holders**

### Discussion

Although the initial intention of this research was to examine traditional healing practices in Mi'kmaw communities, what became clear through engagement with Knowledge Holders was a need to recognize personal and collective suffering before healing can take place. Knowledge Holders shared stories of personal, communal, and historical suffering that began with the oppressive *Indian Act* and continues to this day through ongoing systemic racism and discrimination. They shared experiences of collective loss, physical and emotional suffering, and community conflict and shared grief, all of which were said to have been passed down across generations through blood memory. These stories are consistent with the literature on colonialism in Mi'kma'ki (Coffin, 2003; Hanrahan, 2008; Tobin, 1999; Walls, 2010). What is clear is that the suffering resulting from colonialism is not in the past, but rather it is ongoing and must be recognized by all people on this land. In community, there are programs that provide support for

those suffering from the impacts of colonialism in Mi'kma'ki. For example, the Confederacy of Mainland Mi'kmaq (CMM) holds a *Mi'kmaw Support Program* that supports the cultural, emotional and legal needs of Indian Residential and Day School survivors and descendants, and those affected by the 60s scoop and Missing and Murdered Indigenous Women, Girls, and Two-Spirit (CMM, n.d.-a). Similarly, the UNSM offers administrative, cultural, and emotional support for Indian Day School survivors and their families (Union of Nova Scotia Mi'kmaq, n.d.). Given that stigma acts as a barrier to accessing such services, Mi'kmaw healthcare providers and consumers recommend that Band and community members be educated on the effects of colonialism to destigmatize outcomes of IT and normalize seeking help (Vukic et al., 2009).

However, to adequately educate on the effects of colonialism, more work is needed to understand how colonialism has affected Mi'kmaq people. As Knowledge Holders stressed, data on Mi'kmaw health and wellness is lacking. Indeed, statistics Canada routinely excludes Mi'kmaq people living on reserve in national surveys (Mi'kmaq Health Research Group, 2007). While the UNSM, CMM, and the Atlantic Policy Congress of First Nation Chiefs have undertaken surveys to identify health concerns and factors that contribute to health status over time and across communities, more funding and capacity are needed to continue these surveys every 5 years. Understanding how colonialism has affected Mi'kmaw communities and individuals also requires a wholistic understanding of the systemic barriers facing Mi'kmaq people and acknowledgement that systemic racism and discrimination vary within communities. Food insecurity, barriers to employment and education, and harm perpetrated by child welfare and criminal justice systems must be addressed in tandem with increasing access to practices that promote wellness on an individual and collective level (Katz et al., 2017; MacEachern, 2013). Furthermore, sources of suffering may vary based on factors such as sex and gender, sexual orientation, disability, and race (Clark, 2016; Final Report of the National Inquiry into MMIWG, 2019; Levac et al., 2018; Olsen, 2018;). Accordingly, Knowledge Holders discussed the need for data that reflect the unique experiences and needs of all Mi'kmaq people, including biracial and LGBTQ2S+ Mi'kmaw individuals, and programs that offer an inclusive space and intersectional approach.

Knowledge Holders highlighted that Mi'kmaw healing practices, reclaiming ancestral knowledge, land-based healing, collective healing, and wholistic approaches to healing are essential healing pathways for Mi'kmaq people and communities. Flexibility and growth of traditional healing practices were also encouraged, which reflects the *L'nu* way, and fosters accessibility to all Mi'kmaq people, including those who may not have the knowledge or ability to engage in ways that directly align with traditional teachings. Exposure to and engagement with Mi'kmaw-specific healing practices, such as sweat lodge ceremonies, smudging, dancing, and drumming, were said to foster a sense of pride, purpose, and belonging through cultural, community, and land-based connections, all of which were disrupted by colonial policies and practices. Strengthening connections with ancestors through engagement in cultural practices has the potential to lift one's spirit by promoting cultural reclamation and, in turn, a sense of purpose and identity. Taking pride in ancestral cultural and spiritual practices and knowledge helps to restore Indigenous identities, which promotes individual healing and collective healing across generations (Lavallee & Poole, 2010). Indeed, Mi'kmaw youth in Eskasoni identified the importance of cultural engagement in promoting wellbeing. Youth identified that engagement with culture fostered opportunities to socialize with Elders, opportunities to learn and speak their language, and the

maintenance of cultural practices such as respect for others and the environment (Liebenberg & Reich, 2016). The reclamation of Indigeneity, which arises through the recovery of traditional knowledge and practices, has been described as the key to healing from IT (see review Marsh et al., 2015).

Land-based healing in particular was identified by Knowledge Holders as one of the most salient healing pathways across Indigenous communities in Canada. Indeed, land-based healing is widely recognized as being an essential alternative to Western therapy models (Redvers, 2020; Walsh et al., 2020a). Several land-based wellness programs exist in Mi'kma'ki. For example, *Reclaiming Our Roots* facilitates land-based learning opportunities rooted in Mi'kmaw values, through mentoring and workshops. Workshops include eel fishing excursions, land-based cooking, and sacred fire and sweat lodge ceremonies (Reclaiming our Roots, n.d.). Further, the Ulnooweg Education Centre cares for the *Asitu'lsk*, a place that allows generations to gather together to learn, share, and heal in the ancient Forest Wapane'kati. Programming includes medicine walks, varied ceremony, drumming and fire circles, and language camps (Asitu'lsk, n.d.). It is essential to acknowledge the land as being a central dimension of wellness and a foundation for healing. As traditional practices and spirituality depend upon the maintenance of connections to the land (Robbins & Dewar, 2011), the revitalization of Mi'kmaw healing practices cannot be understood separately from the preservation of Mi'kmaw land rights and conservation of ecosystems in Mi'kma'ki. Fortunately, the Mi'kmaq remain steadfast stewards of the land and continue to advocate for their communities' land and fishing rights. For example, the CCM's *Department of Environment and Natural Resources* advocates and empowers Mi'kmaw participation and stewardship interests relating to the environment, natural resources, climate change, forestry, and agriculture (CMM, n.d.-b). CMM's *Mi'kmaw Conservation Group* operates programs for member communities focusing on restoring the concept of *Netukulimk* and protecting the Bay of Fundy and its aquatic life (Mi'kmaw Conservation Group, n.d.).

Related to the concept of *Netukulimk*, many of the ancestral Indigenous teachings center upon *msit no'kmaq*, the idea that we are all connected to one another and all beings on Mother Earth (King et al., 2009). Accordingly, collective healing was a significant focus across Knowledge Holders. Healing and engaging in culture with community members was described as a powerful medicine and preferred to seeking mental health support from providers who are not attuned to the effects of colonialism or healing practices that are grounded in Mi'kmaw culture. Indeed, youth in Eskasoni have identified that positive relationships with family, community, and Elders strengthen and nurture personal attributes like self-esteem (Liebenberg & Reich, 2016). Collective healing is promoted by strengthening connections across generations. Relationships between youth and Elders are essential because Elders provide invaluable cultural teachings that facilitate healing, and youth encourage a passion for learning about culture and having pride in their Indigenous identity. Indeed, the role of Elders in guiding healing practices, transferring knowledge and teachings, and promoting cultural continuity is emphasized across Mi'kmaw communities (Liebenberg & Reich, 2016; Meuse, 2019). However, what has not been explored in the literature thus far is the role of youth in the healing journeys of Elders, who were stripped of their culture and sense of purpose. This finding further emphasizes the importance of strengthening relationships across generations and ensuring that there is space within communities for Elders and youth to learn from one another. For example, *Elder Group*, one of the many programs held by the Sipekne'katik Health Center, fosters intergenerational connection by providing a space for community

to socialize, exercise, craft, and enjoy food among Elders (Sipekne'katik First Nation, n.d.). Similarly, the *Elder Support Program* at the Mi'kmaw Native Friendship Center provides services to enrich the lives of Elders and creates an environment where Elders can continue to connect with urban Mi'kmaw families and communities (Mi'kmaw Native Friendship Center, n.d.).

Notably, Knowledge Holders also stressed the importance of wholistic healing and encouraged the use of the medicine wheel to guide engagement with healing practices. Such an approach allows individuals to balance emotional, physical, mental, and spiritual components of wellness and strengthen connections between the mind, body, and spirit. While mainstream services often fail to address the spiritual and emotional components of health (Auger et al., 2016; Stewart, 2008), Mi'kmaw healing practices and wellness programs promote spiritual and emotional wellness, which, in addition to physical and mental wellness, are needed to fully heal. Indeed, Mi'kmaw youth have previously identified the importance of being viewed in a wholistic way as opposed to being seen only for their mental health. As such, the Eskasoni service model aims to provide consistent services where there is no differentiation between mental health programming and regular youth programming and employs a “human first” approach wherein services are tailored to the physical, geographic, social, spiritual, and emotional needs of each community member (Hutt-Macleod et al., 2019).

Finally, it is important to note that healing pathways outlined by Knowledge Holders work interdependently to promote healing and wellness. The reclamation of traditional healing practices, which are wholistic in nature, cannot be accomplished without recovering ancestral knowledge and centering land-based and collective healing. Furthermore, revitalizing Mi'kmaw healing practices will inevitably help to strengthen connections with culture, community, land, and ancestral knowledge. Therefore, the sources of suffering and healing pathways identified in this research cannot be understood in isolation.

### **Recommendations for Colonial Systems**

Knowledge Holders provided valuable insight into how non-Indigenous providers can support healing in Mi'kmaw communities by actively and intentionally building knowledge about the community they serve and building relationships. Knowledge Holders stressed the importance of acknowledging the suffering experienced by Mi'kmaw communities and learning about the sources of suffering. This is consistent with literature on Indigenous-led healthcare partnerships (Allen et al., 2020; Jaworsky, 2018; Vukic et al., 2009) as well as Call to Action #24 of the Truth and Reconciliation Commission (2015), which suggests that non-Indigenous providers must understand colonialism as a determinant of health. Interviews with health directors providing services to Mi'kmaw communities revealed that there is a significant need to move away from pathologizing Mi'kmaq people and towards understanding suffering in a Mi'kmaw context (Vukic et al., 2009). Placing Western labels such as “depression” on the effects of IT and collective loss can create stigma, present as a barrier to healing, and undermine the plight of the Mi'kmaq people. Indeed, colonial healthcare services must employ culturally appropriate assessment tools which acknowledge structural barriers of poverty, education, and race, relationships with family and community, and the importance of cultural identity and spiritual wellness (MacEachern, 2013; Vukic et al., 2009).

Knowledge Holders also emphasized the importance of integrating Mi'kmaw healing pathways in mainstream health services for Mi'kmaq people. The integration of Indigenous healing models in mainstream mental health services is widely considered to be fundamental to providing care in Indigenous communities (reviewed in Allen et al., 2020; Asamoah et al., 2023) and may help to promote access to traditional healing practices (George et al., 2018). This may be especially important for Mi'kmaw individuals off-reserve who are removed from community and therefore may have greater difficulty accessing healing practices that are grounded in Mi'kmaw culture (Auger et al., 2016). Nova Scotia Health, the largest provider of health services in Nova Scotia, offers a *Mi'kmaw Indigenous Patient Navigator*. This service helps to overcome barriers to culturally safe care, advocate for cultural and spiritual needs, educate clinical staff, and coordinate between community and colonial health systems (Nova Scotia Health, n.d.). While this service is important for Mi'kmaw patients, the integration of traditional practices into mainstream services does not simply involve adding Indigenous elements into mainstream interventions (Oulanova & Moodley, 2010). Rather, *Etuaptmumk*, the Two-Eyed Seeing approach created by Mi'kmaw Elders Albert and Murdena Marshall, must be a guiding principle (Hutt Mac-Leod et al., 2019; Iwama et al., 2009). *Etuaptmumk* entails using perspectives that see and honour both Mi'kmaw and Western ways of knowing and acknowledges the benefits of using strengths from both epistemologies (Iwama et al., 2009).

*Etuaptmumk* can be facilitated through the development of honest, reciprocal, and respectful relationships between allies and Mi'kmaw community members (MachEachern, 2013). However, Knowledge Holders stressed that no matter how well-intentioned and open non-Indigenous supporters aim to be, they are working in the context of cultures, worldviews, and histories of structural violence that they may never fully understand. Therefore, healthcare providers and systems must intentionally center the voices, experiences, and perspectives of the community, and respect that communities must have control and authority over the wellness of their community members. Indigenous-led healthcare partnerships are needed, which place value on the leadership of community-specific Knowledge Holders and traditional healers in the design, delivery, and evaluation of healthcare practices. These partnerships should aim to center traditional knowledge and healing, strengthen cultural identities, integrate community, and promote political empowerment (Allen et al., 2020; Corso et al., 2022; Hutt Mac-Leod et al., 2019; Oulanova & Moodley, 2010; reviewed in Marsh et al., 2015). Nova Scotia is one of two provinces in all of Canada that has created a First Nations health authority to support and manage Indigenous healthcare. *Tajikeimik* (Mi'kmaw Health and Wellness) partners with the Nova Scotia Health Authority and Mi'kmaw communities to enhance existing health services and develop new initiatives in line with wholistic and Two-Eyed Seeing approaches (Manns et al., 2024). This groundbreaking transformation embodies the process of Mi'kmaq reclaiming control and decision-making over the health and wellness of their communities. Another example of how *Etuaptmumk* can be employed to improve community health is the transformation of the Eskasoni Mental Health Services (Hutt-MacLeod et al., 2019). In response to a rise in youth suicides, the Eskasoni Mental Health Services developed a mental healthcare service model which emphasizes community development of programs based on community-identified priorities. Interventions include Western mental healthcare services (e.g., therapy and social work), cultural support (e.g. residential school survivor and descendant services, Elder support, engagement in Mi'kmaw traditions and practices), peer support, and activities/programming for families and community. Services and programming are informed by a local

youth council, and this model of care is tailored to the needs and conceptualizations of the health of the community (Hutt-MacLeod et al., 2019).

In line with the hope of Knowledge Holders for self-governance, self-determination, and Mi'kmaw representation, it is important that recognition of and funding for services and programs that are administered by Mi'kmaq people for Mi'kmaq people be prioritized. Knowledge Holders often discussed that such programs and services are essential alternatives to Western healthcare models and must be offered to Mi'kmaq people consistently. As described in the paper, there are a host of community-led services in Mi'kma'ki. However, government funding often presents as a barrier to accessing these services. For example, the Eskasoni Mental Health team is in a constant state of writing proposals to grant agencies to maintain staff salaries and funding for programming (Hutt-MacLeod et al., 2019). Indeed, through interviews with health directors, Vukic et al. (2009) found that a lack of funding for appropriate services presented as one of the most significant barriers to improving mental health services for Mi'kmaq people. Knowledge Holders in the current study also voiced this concern, sharing that a lack of consistency in the administration of community-based cultural programs due to a lack of funding can cause harm, shifting individuals away from the red road and towards unhealthy ways. Therefore, funding and support for community-based services must be consistently available to promote healing across Mi'kmaw communities.

### **Implications**

In this research, Knowledge Holders identified the sources of suffering across Mi'kmaw communities, including residential schooling and past policies, ongoing systemic racism and discrimination, as well as collective loss, physical and emotional suffering, community conflict, and shared grief. Knowledge Holders also identified pathways to healing that may help to alleviate this suffering. Notably, the importance of engaging in wholistic healing practices that are grounded in Mi'kmawq culture, spirituality, and ways of knowing was emphasized. Similarly, strengthening connections to culture, community, ancestors, and the land were described as healing pathways. Lastly, Knowledge Holders emphasized that learning about and sharing experiences of trauma with like-minded people is an essential precursor to healing. These healing pathways were said to reduce shame and guilt, instill confidence and pride, strengthen identities, foster a sense of purpose, belonging, and hope, and promote a shift to healthy coping, cultural reclamation, and intergenerational healing. This not only helps existing community-based programs identify what services should be emphasized, but it may also influence the integration of Mi'kmaw healing practices into mainstream healthcare for Mi'kmaw communities.

More importantly, this research highlights the importance of consistent access to community-based healing programs and practices that are designed and implemented for Mi'kmaq people by Mi'kmaq people. In contrast to mainstream services, these programs support cultural continuity and community engagement and are grounded in Mi'kmaw knowledge and epistemologies (Vukic et al., 2009). Therefore, findings from this research have implications for increasing acceptance of and funding for these services. These efforts are aligned with the Truth and Reconciliation Commission of Canada Calls to Action (Truth and Reconciliation Commission of Canada, 2015); specifically, to provide support for and recognize the value of Indigenous healing practices that address mental, emotional, and spiritual harm (Calls to Action #21 and #22). These efforts are also aligned with the United Nations Declaration

on the Rights of Indigenous Peoples (UN General Assembly, 2007); specifically, the right of Indigenous Peoples to be actively involved in developing and determining health programs affecting them and to administer such programs through their own institutions (Article 23), as well as the right of Indigenous Peoples to their traditional medicines and the maintenance of their health practices (Article 24).

It is important to note that the findings of this research are Mi'kmaw-specific and the healing pathways identified in this research cannot necessarily be used to understand healing in other Indigenous communities. Nonetheless, many of the themes that were generated can be carried out in practice in a community-tailored manner. For example, pathways such as wholistic approaches to healing, land-based healing, and strengthening connections to culture and community are likely relevant to other Indigenous communities. As Knowledge Holders expressed, the knowledge and values held by Mi'kmaq people and, more broadly, by all Indigenous Peoples, can contribute towards global healing from issues relating to environmental degradation and Western values of individualism and capitalism (Kirmayer et al., 2003; UN General Assembly, 2007). That said, the generalizability of findings was not the goal of this research, and each Indigenous community must be involved in identifying the most salient healing pathways that will best address the most relevant sources of suffering in that particular community.

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