

Our Language Is Our Health

Connecting language revitalization to health outcomes for Indigenous communities

First Peoples' Cultural Council
ICLDC5, Honolulu, March 1-5, 2017



Acknowledgments

- We are grateful to be here on the traditional territory of the Hawaiian people.
- Thank you to the ICLDC and the NSF for support for the workshop sessions.



Who Are We?

- Established in 1990
- Crown Agency: Federal and Provincial funding
- Funding, Resource Development, Support and Advocacy



Governance



Advisory Committee
34 positions
representing each
B.C. First Nations
language

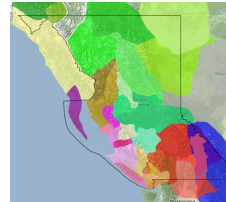


Board of Directors
9 First Nations representatives selected by
application & 3 government appointed seats

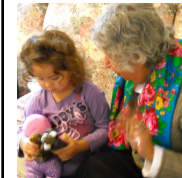


Who Do We Serve?

- 203 First Nations communities
- 34 B.C. languages and 61+ dialects
- First Nations communities, individuals and Aboriginal artists and arts organizations



B.C.'s Language Context



- B.C. home to 60% of Canada's First Nations languages
- 4% of B.C. First Nations speak an Indigenous language
- 59% of speakers are 65 years +
- Number of semi-fluent speakers **increasing**



Goals of the Workshop

- Build our understanding of the link between language and health
- Consider how our work contributes to health in communities
- Learn about an exciting new project in B.C. for language and health



What do we know about language and health?



Language as a Wellness Indicator

Evidence that language supports improved health:

- Physical health, e.g., diabetes
- Mental health, e.g., lower rates of suicide
- General health benefits of bilingualism
- Indirect benefits from improved educational outcomes

Communities report:

- Improved health of Elders/speakers
- Increased health-related indicators among learners

Diabetes

Oster et al. (2014):

- Studied the association between cultural continuity, self-determination, and diabetes prevalence in First Nations in Alberta
- "First Nations that appeared to have more cultural continuity (measured by traditional Indigenous language knowledge) had significantly lower diabetes prevalence after adjustment for socio-economic factors" (Oster et al 2014:1)

Diabetes

Hovey, Delormier & McComber (2014):

- Examined how well-being, especially with respect to diabetes prevention, was understood in Kahnawà:ke, a Kanien'kehá:ka community near Montreal, Quebec
- Found that health & well-being was influenced by:
 - the relationship between culture, language, and ways of knowing
 - how people relate to themselves, their families, and their community

Mental Health & Suicide

Hallett, Chandler & Lalonde (2007):

- Examined how community-level variability in knowledge of Aboriginal languages relate to "band"-level measures of youth suicide in B.C.
- Bands with higher levels of language knowledge (> 50%) had fewer suicides than those bands with lower levels.
- Language-use indicator has more predictive power than 6 other cultural continuity factors

Resilience

Pearce et al. (2015):

- > Study on Indigenous resiliency to HIV
- > speaking traditional Indigenous language had the **strongest** positive influence on resilience
- > "What is more, the enduring health benefits of knowing their traditional language were evident regardless of any history of historical or lifetime trauma" (p. 7)



Benefits of Bilingualism

For children:

- > increased cognitive ability
- > improved working memory
- > strong identity; cultural awareness

For adults:

- > increase in brain size (Mårtensson et al 2012)
- > delay of dementia onset (Alladi et al 2013)



Wellbeing: Educational Benefits

Mi'kmaw Kina'matnewey (2013) on the success of immersion school students:

- > high school graduation rate 87.7% (*more than 2x national average*)
- > *more than 500* students attending post-secondary with 84 graduating post-secondary in 2013

Language class key to Miami Tribe students' success at university (Mosley-Howard et al 2016)

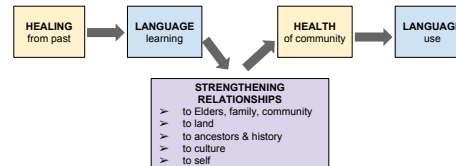
Better educational outcomes → better well-being



How can we understand these findings?



Language & Health Cycle



Social Determinants of Health

Individual

Community

State



Adapted from: Miamac scholar Charlotte Reading (2015). Structural Determinants of Aboriginal People's Health.

Colonization, Indian Act, UNDRIP, TRC ...



Group Discussion

How does **language** (revitalization / use / policy) at each level affect **health**?

How does **your** language work contribute to positive health outcomes? For whom?



Silent Speaker Course

- New initiative to create more speakers
- Who is a silent speaker? Someone who **understands** a language but does not **speak** it.

(a.k.a. *latent speakers, receptive bilinguals*)

Who is a Silent Speaker?

- Residential school survivors
- People who grew up hearing the language in the home
- People who can read and write but not speak
- Returnees to community
- Speakers of other dialects
- Speakers who simply haven't spoken for years because they haven't really had anyone to speak to

Silent Speaker Course

- Developed by Indigenous Sami people in Norway & Sweden (Juuso 2015)
- Uses Cognitive Behavioural Therapy (CBT)
- Helps silent speakers overcome language blocks and begin speaking again



Silent Speaker Course

- BC course piloted in 2016; very positive results
- Second pilot course in progress
- Funded by First Nations Health Authority
- Supports connection between language, culture & wellness

Enormous Potential

- Estimate: 1000s of silent speakers in BC
- If silent speakers become active speakers -> many more potential mentors for other learners
- Faster than creating a new speaker from beginner level
- Healing for silent speakers; increase in day-to-day language usage in the community

What is Cognitive Behavioural Therapy?

- CBT is a proven psychological therapy
- Commonly used for anxiety, phobias, smoking cessation, weight loss, etc.
- Helps people change how they think about a situation (think=**cognitive**) in order to change their response (= **behaviour**) to a situation
- Short-term, problem-focused therapy **NOT** trauma therapy



Course Format

- 10 participants; 2 hours/week x 10 weeks
- Team teaching: mental health professional, FPCC language activist & community coordinator
- Consists of CBT lesson, language lesson and participants sharing experiences
- Homework & internship component



Homework

- CBT method requires practice to achieve goals
- Each participant paired with fluent mentor
- Homework: practice language topic with mentor (safe, friendly, one-on-one environment, 1hr/wk)
- Challenge homework: use language in new setting



Internship

- Goal: recruit silent speakers for language programs
- Each participant has option to volunteer in community language setting (up to 3hrs/wk)
 - language nest or preschool
 - elementary or high school language class
- Create language resources, e.g. signs for local store



Results: First Pilot

- Pre- and post-course surveys
- **ALL 10** participants reported they feel more comfortable and confident speaking their language after course
- All participants liked internship; many said that they will continue to get involved in language venues after course completion incl. teaching role



Results: First Pilot

- Participants enjoyed learning CBT principles
- Reported they found the techniques helpful, not just for reducing anxiety around speaking their language, but for other areas of their life as well
- Contributes to overall wellness



Participant Feedback

"I like it and it has given us a voice in our community to tell others there is a safe place to learn to let go of the past shame of the language and culture. So this is a great start."

"I found myself using our language more with the children at the daycare."

"I have more self-confidence in myself and will not be afraid or ashamed if I make a mistake saying a word or some words wrong."



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Participant Feedback

"Before I felt ashamed of my level, and shame to speak in a non-native setting. This course has built up my courage to speak in any setting and proud to be a strong native woman."

"But I am not afraid to use my language in any scenario [...] Thank you all for giving me the strength to be confident to start to speak my language."



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Pilot #2 In Progress

- Refine format and course materials
- Language component delivered over Skype 8/10 sessions
- Goal to move towards independent delivery in communities; roll out province-wide



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Example Activity: Avoidance Strategies

- Work in pairs
- Do you speak your language (or the language you work with) as much you can?
- If our goal is living languages in all our communities, why not?



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Cognitive Errors

- Overgeneralization
 - Someone laughed at me once, someone will laugh at me every time I try to speak.
 - Is that true?
 - How sure are you that is true (%)?



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Cognitive Errors

- Mind Reading
 - If I make a mistake, someone will think that I don't know how to speak properly.
 - How do you know they will think that?
 - How sure are you that is true (%)?



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Cognitive Errors

- Black and white thinking
 - I avoid speaking because I really don't know how to speak.
 - You know nothing? Is that true?
 - How sure are you that is true (%)?

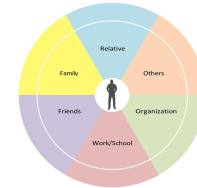


Goals for Silent Speakers

- Change automatic thinking patterns
- Change behaviour
- Begin speaking again



Activity #2: Language Network Map



Key Reference

Juuso, J. (2015). *I Am Taking My Language Back* (Translation of *Jag tar tillbaka mitt språk – Mv gjelem báástede vaaitam*). Brentwood Bay, BC: First Peoples' Cultural Council.

Full list of references available upon request.



Closing

Thank you! Mahalo!

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