



# SPIRITUALITY AND COPING WITH DISTRESS IN INDIGENOUS STUDENTS

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## INTRODUCTION

- Due to the devastating effects of colonization, **Indigenous populations** across the globe experience higher rates of depression and suicidality, and lower life expectancy (2) than all other ethnicities.
- However, all Indigenous peoples have a long history of traditional medicine, spiritual and ceremonial well-being, and healing practices (2), suggesting that **traditional culture** may constitute an important source of strength and resiliency.
- Our lab is currently engaged in a broad examination of **risk and resiliency** factors, particularly focusing on **cultural strengths** and their relation to stress, coping, well-being and distress.
- The current study specifically seeks to examine the impact of **traditional beliefs, cultural identity** and adherence to **traditional spiritual practices** on well-being and depressive symptoms, in a sample of students of Indigenous descent.

## HYPOTHESES

1. Are a high adherence to traditional beliefs and a strong sense of cultural identity related to increased well-being and lower depressive symptoms?
2. Are strong traditional beliefs and cultural identity sufficient, or is active participation in spiritual practices necessary for resiliency?

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## METHODS

### Participants

- Indigenous students
- Projected total sample, N = 60
- Participants are not restricted to a specific Indigenous group
- Being a registered Tribe member is not necessary

### Measures

- **Traditional beliefs & practices** (see scales section)
  - Native American Spirituality Scale
  - Ethnic, Culture, Religion Scale
  - Cultural Connectedness Scale-short
- **Well-being**
  - Brief Inventory of Thriving (BIT, Diener et al., 2014)
- **Depressive Symptoms**
  - Center for Epidemiological Studies Depression Scale (CES-D, March 1997)

### Procedure: Global Study

**Assessment 1:** Following consent procedures, participants complete an online series of 21-scales.

Directly after, a contextual-threat interview is undertaken using the *UCLA Episodic Life Stress Interview* (Rudolph & Hammen, 1999).

**Assessment 2:** In a follow-up interview one week later, participants complete a clinical interview using the DSM-5 based Mood Disorders Interview (APA, 2013). Participant are then debriefed, and compensated for their time.

The scales for the current study are embedded within the questionnaires package in Assessment 1

## SCALES

All measures assessing traditional beliefs & practices were developed in collaboration with Indigenous Peoples, by their authors.

❖ **Native American Spirituality Scale** (Greenfield et al, 2015): This scale measures various spiritual beliefs (e.g. *I believe everything is alive with a spirit*), and practices (e.g. *I wake up early and pray to Creator/Ancestors*).

❖ **Ethnic, Culture, Religion Scale** (Long & Nelson, 1999): This scale measures cultural pride (e.g., *how do you feel about your ethnic background?*), view of culture as a strength/ weakness (e.g., *do you feel that your cultural background helps you?*), spiritual identity (e.g., *how do you feel about your spiritual identity?*), language (e.g., *do you speak your Native language?*), participation in tribal activities (e.g., *do you participate in tribal activities?*) and use of ceremonial/ spiritual resources or healers (e.g., *do you make use of ceremonial/spiritual resources or healers?*).

❖ **Cultural Connectedness Scale-short** (Snowshoe et al., 2014): This scale examines levels of cultural connectedness in 3 areas: 1) Identity (e.g. *I feel a strong sense of belonging to my Indigenous community or Nation*), 2) Tradition (e.g. *I use tobacco for guidance*), & 3) Spirituality (e.g. *I know my cultural/spiritual name*)

## RESULTS

We predict that cultural connectedness and strong adherence to traditional beliefs will be sufficient to confer resiliency to depressive symptoms and increased well-being.  
Coming soon to a poster board near you!

## DISCUSSION

- Indigenous peoples have been largely ignored by contemporary psychology, and the few existing studies mainly focus on risks and vulnerabilities.
- Our current research seeks to remedy this lacuna and to go beyond risk and vulnerability, by examining **cultural strengths and resiliency**
- **Strengths:** Indigenous measures, strengths-based approach
- **Limitations:** a relatively small sample, all students, predominantly from a single Nation, self-report
- Given the diversity in Indigenous cultures, beliefs and practices around the world, and Indigenous people's incredible resiliency despite facing continued adversity, we believe that our current and future studies can help to identify important factors that can boost well-being and buffer mental illness across Indigenous and non-Indigenous populations.

### References

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2. Grandbois (2005). Stigma of mental illness among American Indian and Alaska Native nations: Historical and contemporary perspectives. *Issues in mental health nursing*, 26(10), 1001-1024.