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| **Title of Symposium** Participatory research to improve wellbeing and reduce substance use with Indigenous communities: perspectives and experiences from Canada, United States and Australia |
| Indigenous Peoples have experienced a history of colonization and dispossession of culture and land and continued harms through cultural genocide and forced assimilation attempts. Combined with contemporary issues such as continued policy failures in social services, education and health care systems this has resulted in loss of cultural knowledge and language in Indigenous communities and poorer outcomes in many of the social determinants of health compared with the non-Indigenous population and significant trauma for Indigenous Peoples with lasting inter-generational effects. Substance use and related harms are one area in which Indigenous Peoples experience inequities as is demonstrated in higher rates of substance related harms, disorders and reduced access to effective prevention, intervention and treatment services. Researchers in Canada, the United States of America and Australia are working closely with Indigenous communities to reduce the inequities experienced by these communities by developing effective prevention and treatment services with Indigenous Peoples for Indigenous Peoples.  **General Objective**  We will present on a recent literature review of drug prevention programs for Indigenous adolescents and will discuss current participatory approaches used by researchers with Indigenous communities to improve wellbeing, reduce health inequities and empower communities in the context of substance use and related harms.  **Proposed format of the session**  Presentations:   1. Background: Contextualising substance use and related harms experienced by Indigenous Peoples. Current evidence around substance prevention programs: findings of a recent systematic review 2. First Nations child wellbeing: Community Collaboration to Develop a Culturally-Informed Measure 3. The rigorous examination of three evidence-based and culturally-centered Native American family prevention programs of the American Southwest: A community based participatory research partnership 4. Working with Aboriginal communities to reduce alcohol-related harms: lessons learned from a participatory research project with Aboriginal Australians   Followed by panel discussion about researchers’ experiences with participatory approaches with Indigenous communities and lessons learned for future research.  **Conference theme and/or subthemes addressed**  Health inequities |

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| **Title of Presentation 1**  First Nations child wellbeing: Community Collaboration to Develop a Culturally-Informed Measure |
| **General Objective**  This presentation will describe how researchers and communities developed collaborative relationships to create, implement, and evaluate a new measure for First Nations children based in holistic understandings of wellness.  **Proposed format of the session**  The presenter will describe how the project followed a community-based participatory research approach and was overseen by a research advisory made up of leadership from the partner organization. Interviews were conducted with community members in the Robinson Superior Treaty Area and analyzed to identify indicators of wellbeing for children. This analysis was utilized to generate items for a new measure. This measure was administered by two mental health intake workers to the parents and caregivers of 91 children who were seen through intake for service at a First Nations service organization, along with the Child and Adolescent Needs and Strengths measure (Lyons et al. 2003). Following piloting, interview with the mental health intake workers, and measure refinement, a principal component analysis was conducted and three factors emerged: General Wellbeing, Traditional Activities, and Social Engagement. This measure represents one of few created and validated for use specifically with a First Nations population and aligns with the literature regarding the importance of engagement in traditional activities and understanding of culture for the wellbeing of Indigenous people.  **Conference theme and/or subthemes addressed**  Health equity |

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| **Title of Presentation 2**  The rigorous examination of three evidence-based and culturally-centered Native American family prevention programs of the American Southwest: A community based participatory research partnership. |
| **General Objective**  This presentation will discuss this National Institutes of Health funded study and provide an overview of the study design, a quasi-experimental longitudinal comparison over four waves within and across three American Southwest Native communities involving child (fourth & fifth graders) and parent/caregiver participants in the examination of an intergenerational family prevention program including the sharing of preliminary findings. It will also detail the community based participatory research approach and active engagement with three different Tribal Research Teams (Apache, Navajo & Pueblo).  **Proposed format of the session**  The presenter with share the Family Listening/Circle Program (FLCP) a CBPR, culturally-centered, and evidence-based intergenerational family prevention program currently implemented by three American Southwest Native communities through Tribal Research Teams in an Apache, Navajo, and Pueblo communities with the University of New Mexico Center for Participatory Research. The focus of each tribal community’s family prevention program is to strengthen cultural connections, increase family communication, and develop protective factors to reduce the initiation of substance use among fourth and fifth graders who participate in a dinner-based program with their parents/care provider and elder. The family program is called the Family Listening Program in the Apache and Navajo communities while in the Pueblo community the program is called the Family Circle. The Apache and Navajo programs are 12 sessions while the Pueblo program is 14 sessions in length. Each session is held in the evening and two hours long including dinner for all the participants. The FLCP is implemented annually by trained tribal facilitators. Dr Belone will present on the partnership processes and the outcomes of this project.  **Conference theme and/or subthemes addressed**  Health equity |

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| **Title of Presentation 3** Working with Aboriginal communities to reduce alcohol-related harms: lessons learned from a participatory research project with Aboriginal Australians. |
| **General Objective**  This presentation will showcase how researchers worked in partnership with Aboriginal communities to develop, implement and evaluate a community-based program aiming to reduce alcohol-related harms among Aboriginal people. It will also present the impact that the community-based program has on community  **Proposed format of the session**  The presenter will discuss how researchers used a community-based participatory research approach to develop partnerships with three Aboriginal communities and collaborate closely to develop a multi-component community-based program. The program was designed to be standardised across communities but also tailored to communities’ priorities and resources. Routinely collected police and emergency department data, supplemented by community surveys were used to evaluate the effectiveness of the program in reducing alcohol-related harms and improving empowerment and safety. Qualitative interviews with community-based partners were conducted about the extent of community participation, community impact and sustainability of the program.  The presenter will then detail how each community implemented a suite of 10 to 15 activities, reaching approximately 1,000-2,000 people in each community. Following the program implementation, there was a 19% increase in community members’ empowerment, a 21% reduction in alcohol-related verbal abuse and 9% reduction in alcohol-related injuries observed by community members. There was a 20%-31% increase in how safe people felt at night. Interviews with community-based partners indicated participation was moderate to high and elements for sustainability of the program were identified.  The presentation will conclude with a description of how this study provides guidance for researchers, policy makers and program developers to work with Aboriginal communities to develop effective intervention strategies and frameworks to evaluate these strategies.  **Conference theme and/or subthemes addressed**  Health equities |